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A LETTER

TO THE

N. I.

MEDICAL PROFESSION

OF

VAN DIEMEN'S LAND.

BY W. R. PUGH, M.D.

LAUNCESTON, V. D. L.:

PRINTED AT THE "LAUNCESTON EXAMINER" OFFICE,
BRISBANE-STREET.

1845.

A LETTER
TO THE
MEDICAL PROFESSION
OF
VAN DIEMEN'S LAND:

ACCOMPANIED BY
THE PARTICULARS OF AN OPERATION FOR STRANGULATED
CONGENITAL HERNIA,
&c. &c.

BY W. R. PUGH, M.D.

“ Oh ! if there be
Justice in Heaven, and we are assured there is,
A day must come of ample retribution !”
Foscari.

LAUNCESTON, V. D. L. :
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TO THE
MEMBERS OF THE MEDICAL PROFESSION
OF
VAN DIEMEN'S LAND.

Launceston, August 14th, 1845.

GENTLEMEN,

The cause of my requesting your attentive perusal of the following pages will be found in the letter which appears in the *LANCET*, of February 1st, and the use made of the Editor's reply by the writer of the letter in the *LAUNCESTON EXAMINER* of August 7th.

I shall not offer an opinion upon the case, but, having arranged the documents already before the public, and added the particulars of the operation and the *post mortem* appearances, leave to your decision the merits of the treatment of the late Mr. Thomas Williams, in as far as I was professionally responsible.

The fearful position occupied by every medical practitioner in this colony will be rendered obvious to you. The law has vested in its authorities the power of dragging before its tribunals any member of our profession who may, from envy or malice, become the subject of town scandal.

An empirical adventurer, ambitious of notoriety, versed in academic oaths, and thus prepared for an affidavit of the proper strength, has but to land upon our shores, and select some resident practitioner as the

object of attack. He has here every facility afforded for destroying the character and reputation of his victim: he may prefer a charge of manslaughter at the Police-office, based upon the mere report of circumstances which occurred months or years before his arrival in the colony, thereby rendering it difficult or impossible to produce evidence of the falsity of the accusation. A person having nothing to lose may thus destroy the reputation of the living and disturb the ashes of the dead, in attaining his prime object—NOTORIETY.

Who, with a proper regard to his own reputation and the feelings of his connections, will henceforth dare, at the eleventh hour, to offer his aid to the rescue of his fellow-man, knowing that success is doubtful, and that the want of it will doom him to appear to answer a charge of felony upon the arena of a common Police-office? If this be the law, have we no corrective, as a body, by which to neutralise the operation of so fearful and unjust an institution? I feel that we have, and therefore appeal to you, who alone can appreciate the circumstances, and form a correct judgment as to results.

I have the honour to subscribe myself,

Your most obedient,

W. R. PUGH, M.D.

PARTICULARS
OF
AN OPERATION
FOR
STRANGULATED CONGENITAL HERNIA,
&c. &c.

POLICE INVESTIGATION.

THE information and complaint of Burton George Haygarth, who deposeth and saith—I am a Doctor of Medicine; it has become known to me that a death occurred some time since in the town of Launceston under very questionable circumstances; there are circumstances of a very questionable character connected with the death of Thomas Williams, of Launceston, merchant; my information respecting these circumstances I derived from the medical attendant of the family, Dr. De Dassell, of Launceston, and from Mr. Surgeon Doughty, who was called in to inspect the body; I allege that due and suitable professional measures were not adopted, and were neglected to be used, in order to the surgical relief of the said Thomas Williams, by the party under whose professional charge he was at the time of his decease, and had been previously thereto—this party was Mr. Pugh, of Launceston, surgeon; I have been informed that, for the relief of the said Thomas Williams, a surgical operation was deemed necessary; which operation was inadequately performed, to the extent of a culpable failure, for the relief of the said Thomas Williams, and that culpable and ignorant neglect, in not renewing other, or similar,

medico chirurgical means, for the relief of the disease, characterised the mode in which the case was conducted until the death of the said Thomas Williams took place ; which death was due, so far as human probability can discern, to the culpable neglect of the professional measures which belong to the case in question. The said Mr. Pugh, whose name, I understand, is William Russ, was, I allege, acting surgically in the operation which he performed upon Thomas Williams, and treated the said Thomas Williams with gross negligence, ignorance, and rashness, and thereby occasioned his death.

(Signed) BURTON GEO. HAYGARTH, M.D., &c.

Taken and sworn before me,
at Launceston, this 22nd
day of August, 1842,

(Signed) WILLIAM H. BRETON, J.P.

The further information on oath of Dr. Burton Geo. Haygarth—It was about four or five months ago that I first heard of the circumstances attending the death of Mr. Williams, and that there was something wrong in the case ; as near as I can recollect it is about six weeks ago since I applied to Mr. Mulgrave, the coroner, on the subject ; this was as soon as I had received what I considered authentic information on the subject ; the coroner's reply to my application was, that he did not consider it came under his department ; I then transmitted my notice to the coroner, and the coroner's reply, to the Colonial Secretary, requesting that the proper course in law might be proceeded with, but received no reply ; I considered it my duty to write a second time to the Colonial Secretary, to which I got no answer ; I wrote a third time, and got no answer ; conceiving that the Colonial Secretary considered it no business of his, I applied elsewhere ; I applied to a justice of the peace ; on that application he directed me to apply to another coroner, specifying W. H. Breton, Esq. ; I went to that gentleman and tendered him a notice, as coroner, which he rejected, declining to interfere as coroner, but advised me to apply to a justice of the peace ; I accordingly returned to the justice of the peace who I had first applied to, and he considered that it would be better that the investigation should take place at the police-

office ; I then laid the information of those facts of which I was acquainted, or rather some of those facts, sufficient to enable the magistrate to ascertain further particulars, and to investigate the matter ; *I had no conversation* with Dr. De Dassell or Mr. Doughty from the time I first heard the report till within a few days of my application to Mr. Mulgrave ; it was in consequence of what Dr. De Dassell and Mr. Doughty stated, in addition to what I had previously heard, that I was induced to lay the information respecting the death of Mr. Williams.

Cross-examined by Mr. Gleadow—I did not consult any of the relatives of Mr. Williams before taking the present steps ; I ascertained that there were other members of the medical profession present, both at the operation and the *post mortem* examination, besides the two I have already mentioned ; so far as my information extends, the names of those gentlemen are Mr. Pugh (as I understand) the operator, Mr. Benson, Dr. Gaunt, and the other Mr. Salmon, and besides these the family physician, Dr. De Dassell ; at the time I received the information I was not aware that Mr. Doughty and Mr. Pugh were not on friendly terms ; on the contrary, I know that they met in consultation in the case of a man in the service of Mr. Borradale ; I cannot say that I was in the colony or not at the time that operation was performed, but I have every reason to believe I was ; I arrived in the colony, as near as I can recollect, about last October or November ; I do not know whether Dr. De Dassell and Mr. Pugh were on friendly terms or not ; I believe they were acquaintances ; I cannot say if they spoke when they met each other in the street ; I did not apply to any of the other medical gentlemen who were present at the operation performed on the late Mr. Williams for information respecting the case ; I had suitable reasons for not doing so ; the information relative to the case I received from Dr. De Dassell, as near as I can say, is as follows—I ascertained from Dr. De Dassell, in the course of conversation, that he was the medical attendant of the late Mr. Williams ; that when Mr. Williams was first taken ill, he was in attendance ; that he proceeded to prescribe for him, and in the course of the night dis-

covered that the patient was labouring under a protrusion of the intestine from the abdomen ; that about five in the morning (to the best of my recollection) he made this known to Mrs. Williams, *and said that something was so severely the matter that all the medical staff of the place must be summoned* ; Mr. Benson was called in, next Mr. Pugh, and some others ; that remedies were applied for relief of this affection until by surgical advice an operation was deemed necessary ; previous to the performance of this operation, a friend of the family, whom I believe to be Mr. Taylor, but I am not sure, requested of the operating surgeon that all the available professional assistance that could be had should be obtained, and, as I believe, specifying Mr. Porter as one of those, and that Mr. Pugh rejected his (Mr. Porter's) assistance, and said that if they wanted him (Mr. Porter) he (Mr. Pugh) would go out of the house, or words to equal or similar import ; that with the assistance already had, an operation for the relief of the patient was attempted to be performed. This operation was to return a portion of the protruding bowel aforesaid into the abdomen ; that Mr. Pugh proceeded with the operation ; conceived the operation to have been performed ; applied the dressings, and left the patient in the usual manner under these circumstances ; *that none of the symptoms which indicate the successful performance of these operations whatever made their appearance, with the exception of some very slight appearances for the first hour or two* ; that medicines were ordered, but no further surgical assistance whatever used ; *consequently the patient died* ; Dr. De Dassell also told me that Mr. Pugh affirmed that the intestine was returned into the abdomen, stating this to the surrounding gentlemen ; that a *post mortem* examination was proceeded with, previous to which one other gentleman was called in, besides those in attendance on the case ; that was Mr. Doughty ; that on the wound being opened, the intestine which Mr. Pugh asserted he had returned into the abdomen, was thereupon immediately seen to be out of the abdomen, a circumstance sufficiently accounting (so Dr. De Dassell stated he considered) for the whole mishap ; this is the chief substance of the information which I received from Dr. De Dassell. The information from Mr. Doughty on different occasions is as fol-

lows:—That he (Mr. Doughty) was not present when the operation took place, but he was so at the *post mortem* examination; Mr. Doughty told me that on going into the room where the body lay, directly the sheet was removed an involuntary reflection was caused by the circumstance; the reflection was, good God!—why—what's that?—there's the tumour! next that Mr. Pugh after the inspection met him in the street, (I believe it was one or two days after) and argued with him that the intestine was returned in consequence of Mr. Doughty having said, or been supposed to say by Mr. Pugh, that that intestine was never returned; Mr. Doughty adhered to his opinion,—(Mr. Doughty, I believe, said Mr. Benson was present at the time),—and in consequence of Mr. Doughty adhering to his opinion, Mr. Pugh said, “Ah! well, never mind, you remember your case at the hospital;” to which Mr. Doughty replied, “You will please to remember, Mr. Pugh, that the knife on that occasion was in the hands of my superior, and that if any blame attaches to what you allude to, that blame is not mine,” or words to similar import and effect; and further, Mr. Doughty stated, that Mr. Pugh endeavoured to explain the cause of death in this case, by an appearance within-side the intestine, which appearance was the very consequence of the inadequate manner in which the operation was performed, or attempted to be performed; Mr. Doughty stated to me what that appearance was, and that, in consequence of the unrelieved stricture round about the intestine, a peculiar inflammation had been set up within-side the bowel, which caused the partial union of the two contingent surfaces within-side—Mr. Pugh wishing to have it understood, that he (Mr. Williams) would have died of this appearance internally, at any rate; Mr. Doughty adding, “*If he had not died of the palpable fact of the intestine being out of the abdomen when it ought to have been in it.*” Both Dr. De Dassell and Mr. Doughty stated to me that the operation had been inadequately performed; neither (to my knowledge) did Dr. De Dassell or Mr. Doughty know anything of my intention of applying at the police-office on the present subject—and when they learnt that I had done so, they endeavoured to persuade me to de-

sist, for the sake of the family and other reasons ; neither did they know that I was about to give information to the coroner ; Dr. De Dassel has told me he has had opportunities of seeing Mrs. Williams, subsequently to the death of Mr. Williams, relative to investigating the case of Mr. Williams, in the course of which interview the tenor of her wish was that no investigation should take place—in short, that her friends were averse to it.

The information on oath of Henry Augustus De Dassel, who saith—I am a Doctor of Medicine, and reside in Launceston ; I was medical attendant to the late Mr. Williams at the time of his death ; I was in attendance on him at the time he was taken ill ; I was sent for at four o'clock in the morning ; I found that the nature of his complaint required that I should send for other medical men ; *I sent for Messrs. Benson, Salmon, Pugh, and Gaunt* ; they came ; I was present when an operation was performed on Mr. Williams, by Mr. Pugh ; the other medical gentlemen, whom I have mentioned, were also present the whole time ; Mr. Benson told me Mr. Pugh wished that the case should be in the hands of the surgeons present, and that I should be considered as the consulting medical man of the family only ; Mr. Headlam, Mr. Hardwicke, and some other friends of Mr. Williams, proposed to send for Mr. Porter ; I was consulted if he should be sent for ; when this was proposed, Mr. Pugh refused to meet Mr. Porter ; *I cannot say of my own knowledge, that Mr. Pugh refused to meet Mr. Porter* ; I understood so from Mr. Headlam ; I did not hear Mr. Pugh on that occasion make any observation respecting Mr. Porter ; I have witnessed many operations of a similar kind before ; the means usually adopted for the relief of the patient were used by Mr. Pugh ; no observation was made during the operation, in my hearing, to the effect that it was not properly performed ; the usual medicines were ordered after the operation ; Mr. Pugh was in attendance after the operation ; *I did not tell Dr. Haygarth that it was in consequence of there being no further surgical assistance called in that the patient died* ; I recollect Dr. Gaunt asking Mr. Pugh, when he was finishing the operation, if the intestine was returned, and Mr. Pugh replied it was ; I was present

at the *post mortem* examination ; I had some conversation with Dr. Haygarth on the subject of the *post mortem* examination ; I told him (Dr. Haygarth) that Mr. Pugh opened the *sutures* and took out a tumour, which in my opinion was operated upon before, cutting it and dividing it, and showing in the intestine a *septum* which had formed there in consequence of adhesive inflammation ; some other conversation took place on the matter ; in my conversation with Dr. Haygarth I only described to him what had taken place at the operation and at the *post mortem* examination ; I did not in any way endeavour to induce Dr. Haygarth to bring the matter before the police ; I had a conversation about a fortnight ago with Mrs. Williams respecting the propriety of an investigation ; she said she did not wish it ; I am of opinion that *Mr. Pugh performed that operation with great cure and unusual degree of delicacy.*

Cross examined by Mr. Gleadow.—I am of opinion that Mr. Pugh *betrayed no want of skill or knowledge in performing the operation* ; I have no reason to believe from what I observed during the operation or at the *post mortem* examination that *the death of Mr. Williams was occasioned by any mal-practice on the part of Mr. Pugh*, neither do I believe that his death was occasioned by *Mr. Pugh having neglected to do anything in the operation which he ought to have done* ; I am of opinion that the death of Mr. Williams was occasioned by the symptoms of a strangulated hernia ; I am of opinion that nothing could have *been done more or better than what was done in Mr. Williams' case.*

Cross-examined by Mr. Pugh.—When I first saw Mr. Williams he was labouring under griping pains, which he attributed to having taken Sauterne, cucumber, and cheese ; it might have been between three and four o'clock in the morning when I first saw him ; he did not tell me when he was first taken ill ; I learned that fact about two hours afterwards ; I asked him how long he had been ill, but he gave me no answer, he was dozing ; I did not till five o'clock in the morning ascertain that Mr. Williams had left the theatre in so much pain that he required assistance to get home ; I gave him some castor oil and opium, from which he said he had received relief on a former occasion ; I also administered

an injection; I remained till the injection took effect, then left the chamber and remained in the house; Mr. Williams fell asleep and slept about three-quarters of an hour; he then rang the bell and sent the servant to tell me to come in; he then complained of a return of pain all over the abdomen, and I proposed to examine him; and on examination I ascertained there was an inguinal hernia on the right side; I frequently asked Mr. Williams to what he ascribed the frequent attacks of griping with which he was afflicted, but he gave me no answer; I subsequently learned from Mr. Williams that he had for some time previous been troubled with inguinal hernia; I called in Mr. Benson, as near as I can recollect, about six o'clock on the same morning that I was called in; before I called Mr. Benson, I tried to reduce the hernia by applying the *taxis*; at first the attempt was not attended with much pain, but it was about *twenty minutes afterwards*; I was engaged in the employment of the *taxis* about *ten minutes*; immediately after having failed to reduce the hernia, I consulted Mrs. Williams and sent for Mr. Benson; on his arrival, a warm bath was given, and three grains of tartrate of antimony, mixed in an ounce of water, a teaspoonful being administered every five minutes; this was sufficient to excite vomiting; there was no vomiting previous to the administering of tartrate of antimony, the sickness commenced about half an hour afterwards; the symptoms became more severe after Mr. Williams came out of the bath; I was consulted by Mr. Benson previous to the adoption of these measures; this treatment was employed in consequence of a consultation held with Mr. Benson; Dr. Gaunt was the next gentleman called in; after Mr. Williams left the bath I again tried the *taxis*; Dr. Gaunt arrived a few minutes after I made this second attempt; on his arrival Mr. Williams was bled to faintness, in an upright position; he was bled with my sanction, in consequence of a further consultation; I cannot state what time this bleeding was performed, but, as near as I can recollect, it was about noon; Mr. Williams was bled but once; I do not recollect that Dr. Gaunt was to come back at four o'clock in the afternoon, to see the effect of the bleeding; I cannot recol-

lect the time at which Mr. Pugh was called in, but I know it was in the afternoon; I, in company with Mr. Benson and Mr. Pugh, after consulting upon the state of Mr. Williams, went in search of Dr. Gaunt, in order to hurry the performance of an operation which had been decided upon; on meeting Dr. Gaunt, we immediately returned to the house of Mr. Williams, and having obtained his consent, the operation was performed as soon as circumstances would permit; Mr. Salmon was driven up to the door of Mr. Williams' house, by Mr. Gilles, a few minutes previous to the operation; Mr. Salmon concurred with the other medical gentlemen, upon the necessity of performing the operation without delay; I think some mention was made about calling in some further medical assistance, but I do not recollect of anything being said about it in Mr. Pugh's presence; I think Mr. Paton was mentioned; if such a request was made, no objection was urged on the part of Mr. Pugh; Mr. Williams stated that he wished Mr. Pugh to perform the operation; *I do not recollect that Mr. Williams was in much pain previous to the operation; I recollect that, immediately on Mr. Pugh's arrival, Mr. Williams was in so much pain, and the hernial tumour was so tender, that, with myself and others, he decided upon performing the operation;* I recollect that Mr. Williams suffered from all the usual symptoms of strangulated hernia; I assisted Mr. Pugh, Mr. Benson, Dr. Gaunt, and Mr. Salmon, in the operation of Mr. Williams; I was not aware of the seat of the stricture, but supposed there was a difficulty in dividing the internal ring; the distance between the external and internal ring was about two inches; I think I recollect Mr. Salmon putting his finger nail under a certain band, which surrounded the neck of the tumour, in order that the knife might be introduced; it was after the hernial sac had been opened, and the usual obstructions to the return of that hernia divided, that this band was discovered; *after the division of this band the tumour, which I could see before, disappeared;* I recollect Mr. Pugh saying that he had passed his finger along the canal, into the abdomen, and I recollect Dr. Gaunt saying that he had done the same; I recollect Mr. Williams made an observation, that the pain he

then suffered was tolerable in comparison to what he had been suffering before—this was immediately after the operation, and previous to our leaving the room; I recollect Mr. Williams, shortly after the operation, taking some gruel, which was retained on the stomach; for some three or four hours previous to the operation, all food and medicine was rejected from the stomach; Mr. Williams slept at intervals during the night after the operation, and, in my opinion, passed a tranquil night; in consequence of the relief of the bowels, and the exhausted state of Mr. Williams, it was considered advisable to delay the administration of aperient medicines for a few hours; I attribute the exhausted state of Mr. Williams to the active measures which had been adopted; in the course of the following day aperient medicines and *enemata* were employed; the operation was performed on Tuesday, and the medicines administered on Wednesday were retained on the stomach until the evening; about eleven o'clock at night irritation of the stomach again commenced; the subsequent treatment of Mr. Williams was the result of consultations between Messrs. Pugh, Gaunt, and Benson, and sometimes I joined them; I never made any remark to Mr. Pugh about being excluded from a consultation; medicines might have been administered without my being consulted; I am not aware of any improper medicines having been administered to Mr. Williams; Mr. Williams had been the subject of hernia from his infancy; I have attended several cases of hernia and *post mortem* examinations; it is the general character of hernia that adhesions are formed; the intestine at the operation was not of its natural colour, it was of a *chocolate colour*, and, in my opinion, *darker* at the *post mortem* examination; I think that when Mr. Pugh reduced the hernia, it contained *flatus*; at the *post mortem* examination the intestine was not distended with wind, *nor did it contain anything as at the time of the operation, but was agglutinated together*; I cannot say how the air contained in the intestines had been removed; I suppose it must have got out; *in my opinion the operation allowed the air to escape*; I have stated that the operation was, in my opinion, *a splendid one, and I again repeat it.*

Cross-examined by Dr. Haygarth—I think that the intestine, which I have mentioned as taken out by Mr. Pugh, was taken out of the abdomen; it was dissected out; I was not near Mr. Pugh when he cut it out, therefore cannot say if it was taken from the inside of the *transversalis fascia*; it was in a state of decomposition, and disfigured, when I saw it; I saw the adhesions; I cannot say that adhesions under these circumstances must needs be external to the *transversalis*; I am not fully convinced that there were adhesions; I do not recollect whether any portion of the intestine, at the *post mortem* examination, was external to the *transversalis*; *I cannot tell whether the patient died of unrelieved incarcerated hernia*; if there was still an incarcerated hernia, subsequent to the first operation, any other surgeon could have relieved it by another operation; there was no passage, so far as I know, through the bowels, subsequent to the operation; there was a vomiting subsequent to the operation, it ceased for a time, came on again, and left off two days previous to the death of Mr. Williams; these symptoms are not those which ought to be expected after a successful operation of hernia; in strangulated hernia you have want of passage and vomiting; but if the strangulation is relieved, it is my professional opinion that want of passage may continue; absence of tone to the bowels may be a cause of want of passage; I might have expressed to Dr. Haygarth, or some one else, that there was something wrong in Mr. Williams' case, in my opinion; *I do not recollect having done so*; I do not recollect expressing to any one that after the operation the intestine was not returned; *I cannot recollect whether I was in a position to see that the usual obstructions to the return of the hernia were divided.*

The information on oath of Mr. John Doughty, who saith—I am a surgeon and reside in Launceston; I knew the late Mr. Williams; I was present at a *post mortem* examination of his body; on that occasion a particular reflection crossed my mind—it was on the body being exposed; *I saw a tumour in the right inguinal region*; *I was surprised to see a tumour of such a size there*; I expressed my surprise to Dr. Haygarth; I met Mr. Pugh a few days after the *post mortem* exami-

nation ; Mr. Pugh asked me if I had reported that the gut was not returned—that is, that the tumour was there ; I told him I had done so, but it was in medical confidence ; there was an observation made by Mr. Pugh relative to a case at the hospital, operated upon by Mr. Benson, when I was present ; Mr. Pugh did not explain to me the cause of Mr. Williams' death ; I did not, at any time, tell Dr. Haygarth that the operation had been inadequately performed ; I did not see the operation ; I told him of the *post mortem* examination ; it was my opinion, judging from what I had heard and saw, that the operation had not been properly performed.

Cross-examined by Dr. Haygarth—The tumour which I saw was external ; when *sutures* were cut there was a dark-coloured tumour, which was a nut of the intestine ; this tumour was external to the cavity of the abdomen ;* it came to view at once on the *sutures* being divided, when the operation had been performed ; the intestine might have been returned within two hours before the death of Mr. Williams ; I was informed at the professional discussion, at the *post mortem* examination, that the vomiting and other symptoms, want of passage, had continued up to the time of his death ; if an operation had been successfully and efficiently performed, such symptoms, I should expect, would not exist—and, if I were in attendance, those symptoms would point out to me that something further ought to be done for the relief of the patient ; I observed the state of the intestines, and there were adhesions external to the cavity of the abdomen ; these adhesions were subsequent to the strangulation, because there must have been a very considerable inflammation existing to produce this adhesion ; if the tumour is affixed to the outside of the belly, the patient cannot return it at his pleasure ; I have heard that Mr. Williams had a reducible hernia, and that he was in the habit of returning it three or four times a day, but I do not know of my own knowledge, as I did not attend him ; there could have been no adhesions to the *sac* of this hernia, if Mr. Williams was able to return it himself, neither could there be adhesions of the gut to the externally surround-

* The sutures were removed three days prior to Mr. Williams' decease.

ing parts of the *sac*, otherwise he could not return it at all—what is fixed externally cannot be at pleasure put internally; incisions for the purpose of returning this gut I saw, at the *post mortem* examination, had been made; to complete an operation for hernia, it is necessary to return a certain portion of the bowel, if it is in a fit state to be returned, or can be returned; from what I saw at the *post mortem* inspection of a portion of the intestine, I am of opinion that it could have been returned; there would not have been adhesion to any extent, nor could it have been in a state of gangrene, to have prevented its being returned; I mean at the time of the operation; even in the state I saw it, it might have been returned with safety; I have seen the gut returned in cases in which it has been in a worse state than the one in question; I am certain that if a surgeon had returned the intestine a day or two, or even an hour or two, before death, it might have given him a chance of life—that is, if no unforeseen circumstances had transpired; if I were called in a case in which vomiting and constipation continued after an operation for hernia, and on examination I saw a tumour, such as I saw in Mr. Williams at the *post mortem* examination, I should proceed to examine the tumour, and I should expect to find, under these circumstances, that some portion of the intestine was still strangulated; I cannot tell, but leave it to be supposed, why I was called to *post mortem* examination, but not to the operation nor during his illness; I made an observation at the *post mortem* examination, addressed to Mr. Pugh, but I cannot say whether he heard it or not, “Why was I sent for now he is dead, I might have been of some service before;” Mr. Pugh did not make any answer; the operation for strangulated hernia generally consists in the release of a strangulated portion of the bowel; I consider, from the way and in the state in which I saw a portion of the intestine at the *post mortem* examination, external to the abdomen, that it was not relieved by the operation; the intestines generally were but slightly inflamed, and in a more healthy state than I should expect, these intestines were within the cavity of the abdomen; I saw no disease upon Mr. Williams

other than the portion of protruded bowel ; as far as I can judge, from my professional knowledge, I believe Mr. Williams died from unrelieved strangulated hernia ; the intestine being opened by Mr. Pugh, a septum was shown within the gut ; *that which I saw would wholly prevent the passage of anything through the gut* ; I should say that portion of the intestine which I saw could not have been agglutinated prior to the protrusion ; if by possibility an intestine should come down after it has been returned, it is the duty of the professional advisers to return it as often as it does come down ; there would be symptoms to show that the intestine had come down ; I stated after the *post mortem* examination that I did not consider that that intestine was ever returned into the abdomen ; that was to Dr. De Dassell and to Mr. Benson ; in all human and professional probability Mr. Williams' death was in consequence of no further assistance being used to return the intestine into the abdomen, which was found outside the abdomen.

Cross-examined by Mr. Pugh—The hernia in Mr. Williams' case was about the size of a pullet's egg ; I do not consider that a small hernia ; such a hernia, if adhesions had taken place to the neck of the *sac*, and if not strong and no stricture, might be returned into the cavity of the abdomen ; a stricture, either at the external or internal ring, would prevent a return of the intestine to the abdomen ; if a stricture, existing at the external ring of a hernia, such as in this case, had been divided, and the portion of the neck of the *sac* brought into view, strangulation would be relieved by the division of the adherent portion of the *sac* ; a hernia of the size of the one in question, and composed entirely of intestine, may become gangrenous in three days—sometimes ten days might elapse ; *I am of opinion that the pain would not cease in a hernia of that description without some relief being afforded* ; the symptoms in strangulated hernia, after a successful operation, are a *cessation of vomiting, a cessation of pain, especially that round the umbilicus ; the action of the bowels goes on, and a discharge of fæces takes place* ; a discharge of fæces generally takes place directly afterwards—two or three hours after ; *I have read of a case where it was*

two days before it took place ;* I do not consider it possible where a successful operation for strangulated hernia has been performed, and the intestine returned into the cavity of the abdomen and remaining there, that an artificial anus should take place, and the patient recover ; in a common reducible hernia of thirty or forty years' standing, I should expect the internal ring and the canal of greater calibre, and therefore less likely to form the seat of stricture ; I should expect to find in a case of hernia such as Mr. Williams's, when strangulation existed for six or seven days, to find the skin discolored, and some dark-coloured fœtid discharge ; I mean when an operation had been performed ; the space of intestine inflamed, as it appeared on the *post mortem* examination, was about two inches ; I am of opinion that a strangulated hernia might have existed for several days, and the inflammation be confined to so small a space as before mentioned ; a certain degree of inflammation must take place in the intestine, but not of much consequence ; if called to a patient labouring under strangulated hernia, and found the abdomen tense, acute twisting pains round the umbilicus, with an inability to retain anything on the stomach, and after having performed an operation with a view to relieve this strangulated hernia, *I found the pain removed and the vomiting cease, I should consider relief had been given* ; in a case of strangulated hernia, if all the means I had adopted had been attended without success, I should immediately proceed to the operation—for hernia, above all other diseases, requires the greatest promptitude ; I never heard of the return of a hernia within a few hours after the operation, but should such a thing occur, I hold that the symptoms would not be so urgent as prior to the operation.

The information on oath of Dr. Gaunt.—I attended the late Mr. Thomas Williams professionally, in company with Dr. De Dassell, Mr. Benson, Mr. Salmon, and Mr. Pugh ; it was on Tuesday morning, I think the

* Vide LANCET, June 18, 1842, p. 414. Case of Charles Hall.—Operation for strangulated inguinal hernia. Operation performed by Mr. Arnott, Middlesex Hospital, on March 17th. Bowels relieved, for the first time, about midnight of the 22nd, fully four days having intervened. The patient was supplied with a truss, and left the hospital in the course of the following month.

2nd November, 1841, when I was first called to attend Mr. Williams, labouring under strangulated inguinal hernia; he was suffering very severely, *having frequent and severe paroxysms of pain*; the hernia was not very painful to the touch; the gentlemen who attended before I arrived had been attempting to reduce the hernia, but had been unsuccessful; Mr. Williams was then bled and put into a bath; vomiting existed, but not to a severe extent; previous to the operation tobacco, in the form of an injection, was used—this failing, an operation was recommended; the gentlemen already mentioned were all present at the operation; there was nothing unusual in the operation until the hernial *sac* was laid open; Mr. Pugh, having divided what appeared to be the strictured part, attempted to replace the bowel, but found he could not do so; on examining, there still appeared to be a part of the stricture which wanted relieving; this having been done, there seemed to be no obstacle to the replacing the bowel in the abdomen, as the finger completely passed round the neck of the *sac*; still great difficulty was found in returning the bowel, but ultimately Mr. Pugh completely succeeded in returning the bowel into the abdomen; it was necessary to expose a part of the intestine, *for the purpose of dividing a band*; it was after the division of that band that the tumour returned into the abdomen; I saw *Mr. Pugh put his finger so far up the inguinal canal that I was of opinion that the finger must have been in the abdomen*; I made no examination of the parts after the gut was returned; the swelling which had previously existed entirely disappeared, and was followed by a cessation of all the unfavourable symptoms; Mr. Williams took some nutriment a short time afterwards, which was retained, although previous to the operation great debility of the stomach and vomiting existed; *Mr. Williams, in the most decided manner, expressed himself relieved by the operation*; on the Wednesday after the operation had been performed, I went home, leaving Mr. Williams without a bad symptom, except that there was no passage in the bowels; I think I again saw him on Thursday evening, to the best of my recollection; I found him getting a little anxious and restless; he complained of a slight tenderness over the

seat of the operation ; I saw the wound dressed once after the operation ; I cannot speak as to the precise time ; the bandages had got partially removed ; the wound was of a most favourable description ; there was *not the slightest elevation of the parts ; there was no hernia* ; the wound had united by the first intention ; I think the vomiting returned on Mr. Williams on Friday ; on Saturday evening there was a fecal matter vomited ; Mr. Williams had vomited several times during the Saturday ; I am of opinion that no medical man would be justified in cutting open the abdomen to search for the cause of obstruction ; *the gut was not, in my opinion, in a strangulated state from the time of the operation till the time of his death*, which happened on the Sunday evening ; the strangulation was so complete at the time of the operation, that gangrene might have taken place, in all human probability, in eight or ten hours ; I was present at the *post mortem* examination of the remains of Mr. Williams ; I was in the room when the cloth was removed from the body ; *not the slightest appearance of a tumour existed in the seat of hernia ; at the post mortem examination the intestine did not contain, any air, fluid, or feculent matter, in order to constitute it a tumour* ; there were considerable bands confining the bowel to the *sac*, and the *sac* itself also adhering to the internal abdominal ring ; there were also bands confining the bowel itself, so as to form a kind of knuckle at rather an acute angle ; the portion of the intestine which was strangulated was removed from the body, I believe by Mr. Pugh ; the whole of the gentlemen were present who had been in attendance on Mr. Williams, also other parties, friends of the deceased, altogether I should think twelve or fourteen persons were in the room ; Mr. Doughty was also present ; *I am quite certain that no observation was made as to Mr. Williams having been improperly treated by any of his medical attendants ; if I had, as a medical man, seen anything at the post mortem examination to excite my suspicion, and felt satisfied that Mr. Williams had been improperly treated,, I should not have considered myself justified in allowing the portion of the gut to be removed without making some remark* ; to the best of my recollection Mr. Hardwicke expressed a wish that Mr. Porter should be

called in, as he (Mr. Hardwicke) stated that he (Mr. Porter) had treated a case similar to that of Mr. Williams' with great success, but Mr. Williams decidedly objected to it; this was before the operation.

Cross-examined by Dr. Haygarth.—I attended Mr. Williams as a medical man and as a friend of his; I did not attend as a medical man who was paid; I am a legally qualified practitioner; previous to the operation cold applications to the parts were used, and the taxis were also used, and I am not aware that any other means or mechanical operations were used; I am not aware that there is a mechanical operation of procedure which was invented some seven years ago, which has in some cases superseded the use of the knife; I have never heard of any mode of procedure adopted previous to operation by Dr. O'Bryen, of Dublin; I am not aware that Cooper's Dictionary alludes both to the operation and the person; I am aware that the book is in extensive circulation; when I put my finger round the neck of the *sac*, it was near the internal ring, but not in it; I put my finger both inside and outside the *sac*; *I am not of opinion that any portion of the intestine when reduced, was left below the internal ring after the operation*; the band which I have alluded to was stretched from the outside of the *sac* to the *transversalis fascia*; it is not an unusual practice to draw down a certain portion of intestine in consequence of such bands, the bowel being more easily replaced by doing so; there was no intestine found in the inguinal canal at the *post mortem* examination; I saw about two inches of discoloured intestine, in the course of the inspection, lying in immediate contact with the internal ring and adhering to it: this gut, lying on the abdominal side of the *transversalis*, was entangled by the *sac*, and also by firm membranous bands; both the *sac* and bowel were inside the abdomen, and entangled there; both the gut and the *sac* were so returned into the abdomen; it is not customary so to do if you can return the gut without the *sac*; the bands did not produce stricture on the gut; I account for the portion of intestine being discoloured from its having been previously strictured; there were some bands within-side the intestines; I think some of these membranous bands were of long stand-

ing; I saw no other similar membranous bands on any other of the intestine; I do not consider it at all singular or curious in that particular portion of the intestine coming down to that particular part; there were no adhesions which connected this portion of the intestine with the outer part of the abdomen; there was no attachment of the *sac* externally; I passed my finger into the internal ring, but not into the abdomen; the symptoms of the disease for which this operation had been performed were permanently absent; they never returned; the symptoms for which the operation was performed were, strong pains round the umbilicus over the whole of the abdomen generally, and especially over the seat of stricture; this symptom does not belong exclusively to the case in question; I know the protracted disease under which Mr. Williams was labouring by the state of the stomach, and by the tumour itself; I consider vomiting an important symptom for detecting that disease; I also consider constipation another symptom; these three symptoms were those for which the operation was performed; I mean in conjunction with the tumour and the appearance of the patient; only two of these three symptoms, namely, vomiting and the pain, ceased after the operation—constipation continued; the countenance and pulse were much improved; the third symptom remained unrelieved till death; it was inadvertently stated before that all the symptoms for which the operation was performed, had ceased after the operation; *the reason why the bowels did not resume their functions I conceive to be from the length of time that they had been constricted, and the violence of the constriction; that portion of the gut had been paralysed*; taking this into consideration with the peculiar manner in which it was bound by the membranous bands, I consider it sufficient reason why the bowels did not resume their functions; when I saw the operation performed, there was about an inch of the intestine below the external ring; about an inch and a half is the common space between the rings; I did not observe anything unusual in the appearance of that part in Mr. Williams, and I should therefore suppose it to be the same; the bands were not such as would prevent the intestine being returned.

Cross-examined by the Bench.—*I distinctly say that I did not see or observe any negligence, ignorance, or rashness in the conduct of Mr. Pugh during the operation—on the contrary, I am of opinion he did all that could be done, and what he did was done with dexterity and self-command.*

The information on oath of William Fletcher, Esq., who saith—I was in attendance on Mr. Williams as a friend during his illness: I saw him on the Thursday after he had been operated upon; I had an opportunity of seeing the seat of the operation; I did not observe any tumefaction or swelling; Mr. Williams said he had been relieved by the operation, and repeatedly told me he was in no pain on that and the following days, up to a short period previous to his death; I was at the *post mortem* examination; I was present when the cloth was removed from the body; *I did not observe any swelling at the part where the operation had been performed—I am sure there was none.*

The investigation occupied from mid-day to midnight. The Bench dismissed the case—the presiding magistrate at the same time stating, “there was not the shadow of a case.”

CERTIFICATES.

I certify that I was present at the *post mortem* examination of the late Mr. Thomas Williams; when the sheet was removed, I perceived an incised wound in the right inguinal region, about two or three inches in length, the lips of which had been brought into opposition by strips of adhesive plaister; these were taken off, and it was found that the incision had healed by the first intention. There was no discolouration of the skin around this wound, and not the slightest swelling or tumour of any kind. The abdomen was opened, and the general appearance of the viscera was healthy;

the peritoneum presented no marks of recent inflammation either where it invests the bowels or where it spreads over the parietes of the abdomen. The piece of intestine which had been strangulated was seen at the internal ring, it was a small portion of *ileum*, and a considerable length of that bowel above and below the diseased portion together with its thickened and contracted misentry, were firmly connected with the peritoneal lining membrane, in the neighbourhood; and sufficiently explained the cause of the frequent attacks of constipation, and griping pains, to which Mr. Williams had been subject for a long period of his life. The small discolored portion of intestine was doubled back on itself, and had been permanently kept in that position by transverse bands of long standing; it was slightly adhering to the *sac*, at one side of the margin of the ring, and a small portion had dropped into the open pouch, and was lying at the orifice of the inguinal canal; quite flacid, and not embraced by the neck of the *sac*. The recent inflammation of the bowel had been confined solely to that part which had suffered strangulation; the dark red hue of the one contrasting strongly with the healthy, and natural appearance of the other. When this diseased knuckle of intestine was slit open, it was apparent that the mucuous and muscular coats, as well as the serous covering, had been the seat of inflammation; the former having thrown out filamentous bands of coagulating lymph across the inside of the bowel; these membranes were quite firm in their texture, and did not present the slightest appearance of gangrene; I am quite positive that no external nor internal tumor existed; the empty and flaccid state of the diseased intestine entirely prevented the possibility of such an occurrence.

J. GRANT.

Cameron-street, August, 1842.

I hereby certify, that I assisted at an operation, performed upon the late Mr. Thomas Williams, by Dr. Pugh. In my opinion the stricture was relieved, and

the bowel previously constricted, was returned within the cavity of the abdomen.

J. K. SALMON, *Surgeon*.

Perth, August 30, 1842.

August 30, 1842.

DEAR SIR—Perceiving that Dr. Haygarth has mentioned my name, as one of the parties who offered to give evidence in substantiation of his charge against you, which has recently been the subject of investigation at the police office, I hereby beg to say, that I never authorised Dr. Haygarth, or any one else, to make use of my name with reference to the affair in question; and furthermore, that until the matter became a subject of public investigation, I never heard the slightest doubt expressed as to the skilfulness of the operation performed by you upon my late lamented friend, Mr. Williams.—I am, dear sir, your's truly,

C. B. HARDWICKE.

W. R. Pugh, Esq.

I certify, on the 2nd November last, hearing that Mr. Thomas Williams, a connexion of my family, was dangerously ill, I proceeded to his residence about 2 P.M. of that day, and found Dr. De Dassell and Mr. Benson in attendance upon him. I called Mr. Benson aside, and was informed by him that Mr. Williams was labouring under strangulated hernia, and had been suffering severely for thirteen hours, and that all attempts to reduce the same had proved ineffectual. I immediately asked Mr. Benson if he would not wish further medical assistance to be called in. He said he should much wish it, but that Mr. Williams being Dr. De Dassell's patient, such a proposal should come from him. Considering that no time should be lost *without any reference to Doctor De Dassell*, I asked Mr. Benson if he would like Mr. Pugh to be sent for, and upon understanding that such was his wish, I, with the consent of Mrs. Williams, *at once went myself and brought Mr. Pugh*, who with Messrs. Benson, Gaunt, Salmon, and De Dassell, saw Mr. Williams between three and four

o'clock, and they decided that an immediate operation was necessary as the only chance of saving Mr. Williams' life. The operation was performed about five o'clock, the whole of the above-named gentlemen being present. I saw Mr. Williams a few minutes before the operation took place, when he showed me a tumour in the right groin, which he said was the seat of his suffering. I did not see Mr. Williams after the operation until the next morning, as it was arranged that one of the medical gentlemen should remain with him that night, and Mr. Benson undertook to do so. When I saw Mr. Williams on the morning of Wednesday, the 3rd November, *he told me he was in no pain whatever, and appeared quite tranquil.* From this period I remained in attendance upon Mr. Williams until his death, which took place on the evening of the 7th November. *During this time he continued free from pain,* and upon being frequently questioned by his medical attendant if he felt any pain upon pressure over the seat of disease, said that he only felt a little tenderness. *All the aperient medicines and nutriment taken by Mr. Williams during Wednesday and the ensuing night were retained by the stomach, including some castor oil, which Mr. Williams said his stomach never would retain when in health.* On Thursday vomiting came on, and the medicines and nutriment were returned at intervals, apparently in an unaltered state. The sickness subsided on Thursday afternoon, *and the stomach again retained the medicines and nourishment, and no nausea was complained of until Friday,* when the stomach again discharged its contents apparently almost without effort upon the part of Mr. Williams. The stomach, during the period I have mentioned, appearing to retain whatever was taken until distended to a certain point, when it relieved itself by vomiting, and again became tranquil. Nothing like *irritability* of the stomach was manifested at any period of Mr. Williams' illness, whilst I was in attendance upon him. On Thursday, the 4th November, leeches having been ordered to be applied to the lower part of the abdomen to be followed by warm fomentations, I assisted Dr. De Dassell during a period of four hours to apply the same. *I saw no appearance of tumour or swelling, nor did Dr. De Das-*

sell say that any existed. The seat of the disease and the incision made at the operation were several times examined by the medical attendants and I invariably heard them say, that the wound had healed by the first intention, and that everything appeared to augur favourably for Mr. Williams' recovery, with the exception of the constipation which had existed from the first, and which appeared to resist the varied attempts which were made to overcome it by purgatives, frequent injections, &c., up to the period of death. On Friday, the 5th November, some friends of Mr. Williams having expressed a wish that Mr. Porter should be called in, I informed Mr. Williams of the same, and asked him if he would wish it; he replied in the most decided terms that he did not, adding that he placed full confidence in his present medical attendants, of *whose attention and the anxious solicitude evinced by them for his recovery, he expressed himself in the warmest terms.* I was not present at the *post mortem* examination of the body of Mr. Williams.

THEODORE BARTLEY.

Launceston, Aug. 29, 1842.

I certify that I was present at the *post mortem* examination of the body of the late Mr. Thomas Williams; that I saw the sheet removed from the body; *no tumour or swelling was observable in the right groin*; the only difference between the right and left groin, consisting in the mark of an incision made in the right groin at the previous operation. I further certify, that no portion of the intestine was visible until after the abdomen had been opened by two incisions, the one extending from the naval downwards, the other from the same point transversely to the right; upon reflecting the flap, formed by these incisions, the discoloured bowel was brought into view.

P. E. STRELESKI.

August 27.

I attended the late Mr. Thomas Williams during his illness, until his decease. Mr. Williams laboured under all the symptoms of strangulated inguinal hernia.

During the day of his attack he suffered extreme pain, and such remedial measures as are usually resorted to in similar cases were unsuccessfully employed, and an operation was therefore deemed indispensable. The operation was performed by Mr. Pugh, who was assisted by Dr. De Dassell, Dr. Gaunt, Mr. Salmon, and myself. Nothing unusual occurred in the early steps of the operation; the *sac* was opened, its neck divided, and an attempt made to return the intestine, but an unforeseen obstacle to reduction presented itself, in a firm band, grasping the neck of the tumour; this band was exposed after gently drawing down the intestine, and was divided with some difficulty, upon which the intestine was returned with facility, *and I was quite satisfied that no portion remained in the inguinal canal. The sac, in this case, was not, in my opinion, returned into the abdomen.* Mr. Williams experienced immediate relief from the operation, and had no bad symptom during the two subsequent days, with the exception of an absence of fœcal evacuation: after this, however, he became worse—vomiting, anxiety of expression, and gradual prostration took place, and he sunk five days after the operation. The incision healed by the first intention, and I frequently examined the inguinal region after the operation, and there *was no swelling nor tumefaction perceptible.*

I was present at the *post mortem* examination, which took place the day after his death. The skin, in the neighbourhood of the incision was of its natural colour; some dressings were removed by Mr. Pugh, and the wound re-opened; *no intestine was visible, either at the external ring or in the inguinal canal.* The cavity of the abdomen was then laid open, and a small knuckle of *ileum* of a chocolate colour, was seen adhering to the edge of the internal ring; this portion of intestine was empty, and lying loosely at the opening of the dilated canal. The knuckle of gut, which had been strangulated, formed an angle, and the serous surfaces, thus placed in apposition, were firmly adherent. On opening this part of the intestine, its calibre was found to be much diminished by bands stretching across from one side of the mucous membrane to the other.

W. BENSON, *Col. Asst. Surgeon.*

Launceston, August 20.

I certify that on the 7th November, 1841, I was requested by L. W. Gilles, Esq., to proceed to the house of Mr. Thomas Williams, of Launceston, in order to attend upon and nurse him, I accordingly did so, and remained with Mr. Williams until the evening of the same day, when he expired. I laid out and washed the body, and observed the mark of an incision in the right groin; there was no swelling or tumour existing there, or in any part adjacent thereto, either at the time I washed the body or at the period of the examination of the same by the medical attendants after death, when I was present. I am quite certain that had there been any tumour or swelling upon the body I must have observed it.

SAMUEL WATSON.

Launceston, August 30, 1842.

Principal Medical Officer's Office,
2nd September, 1842.

SIR—As Principal Medical Officer under the Government, I conceive it my duty to express my satisfaction at the result of the legal investigation given in your favour; and, also my disgust and abhorrence of the proceedings lately attempted to injure your professional reputation.—I have the honor to be, sir, your most obedient servant,

JOHN FRED. CLARK, M.D.,

*Deputy Inspector General of Hospitals, Principal
Medical Officer.*

W. Pugh, Esq., Launceston.

[ADVERTISEMENT.]

TO THE EDITOR OF THE "LAUNCESTON EXAMINER."

Sir,—Justice to my character, as a resident medical practitioner in Launceston, will, I trust, induce you to insert the following statement, which I feel called upon to submit to the public; and I select your journal as the medium of my communication, as affording you the

opportunity in some measure of atoning for the aspersions you have unjustly, but I must believe ignorantly, cast upon my reputation.

For some time past your pages have teemed with articles upon the medical disputes which have disturbed the peace of this side of our island ; and while the hostilities were so unceasingly carried on between Dr. Haygarth and Mr. Pugh, I deemed myself fully exculpated from all blame in remaining silent ; and even in allowing the public to place faith for a time in the reflections which you have thought fit to lavish upon me : for I never hesitated to rest satisfied that a calm consideration of the true facts of the case—unbiassed by party feeling, and unheated by the bickerings of magisterial investigation—would remove from the public any feeling prejudicial to my character, as a professional and an honourable man.

I have been charged by you with plotting and concocting with Dr. Haygarth a system of annoyance and enmity to Mr. Pugh. With those who know my disposition, and have had opportunities of forming opinions of my character, I feel assured I shall gain credit for veracity, while I most distinctly and explicitly disavow all connexion with Dr. Haygarth, or even acquaintance with him, beyond the interchange of such civilities as are due from one medical practitioner to another ; and I state, openly and unreservedly, that before I received the summons to attend as a witness at the police-office, I was not aware that he either had instituted, or contemplated laying, any charge, or bringing forward any such investigation against Mr. Pugh, in reference to the matter in question, as subsequently took place ; and, moreover, I assert that, beyond a medical conversation, at which he was present, I never aided, or in any way promoted, the charge against Mr. Pugh.

These remarks I consider essential for the purpose of rebutting the assertions current (through your press) among some parties that Dr. Haygarth, in conjunction with myself, plotted the investigation of Mr. Thomas Williams' case, with an intent altogether unbecoming a gentleman, and disgraceful, if actually the fact, to a degree sufficient to exclude a man from the society of all men of honour.

In my evidence I deposed to the existence of a tumour at the *post mortem* examination, and my statement is confirmed by the uninterested testimony of Mr. Benson, who states distinctly that the hernial *sac* was not returned into the abdomen. The smallest gift of intelligence must lead a thinking man to the obvious conclusion that the *sac*, composed as it was of three and a half inches of a membrane, about the thickness of bladder, placed under the skin, must inevitably produce an elevation or tumour.

Drs. Gaunt and Grant give different versions of the history of the case; which, taken in conjunction with my own and Mr. Benson's, assist to corroborate. Still their evidence contains so many discrepancies, that I shall not advert to them in detail, to show the impossibility of my statement being otherwise than true, but shall leave it to the unprejudiced examination of persons versed in anatomy and surgery, and competent to understand the weight of the testimony in all its bearings.

The other gentlemen, whose eyesight did not enable them to see, or whose want of acquaintance in such matters did not permit them to discriminate between the smooth surface and the elevation which was caused by the protrusion of the *sac*, &c., doubtless gave their testimony with all candour, and with the most upright motives, but the difference of opinion between us does not warrant the aspersions which you have cast upon my character.

I am, sir, your obedient servant,

JOHN DOUGHTY.

[We are not without misgivings that what Dr. Doughty requests as an act of justice to himself is, at this distant period, unjust to another; nor can we allow that we have either misrepresented his testimony, or perversely injured his reputation. On his evidence, so important to the professional gentlemen whose character it was calculated to ruin, we were fully justified in remarking: and Dr. Doughty cannot forget that attempts were made to overturn the magisterial decision. On a careful perusal of Dr. Benson's testimony [see *Examiner* of 31st August] Dr. Doughty will observe that it is positively stated, "I frequently examined the

inguinal region, after the operation, and *there was no swelling or tumefaction perceptible*. I was present at the *post mortem* examination * * * * *no intestine was visible*, either at the external ring or inguinal canal." On the contrary, we extract from Dr. Doughty's evidence, "I saw a tumour in the right inguinal region; I was surprised to see *a tumour of such a size there*." It is impossible to make these different testimonies corroborate each other; and Dr. Doughty must excuse us in claiming both the right and the ability to judge of the alleged agreement between them. We repeat our former conclusion, that if Dr. Doughty's statement is to be believed—distinctly contradicted not only by Dr. Benson, but by Drs. Grant, Salmon, and Gaunt, Count Streleski, Mr. Fletcher, Mr. Bartley, and the person who performed the offices usual after death; and that upon a question, which is not one of medical science, but depends upon the sight—then, when a charge is once mooted, no man could hope for vindication, however guiltless.

But having made these remarks on Dr. Doughty's letter, we are quite ready to construe in the most favourable manner the motives of his appearance as a witness. It requires a much more extensive knowledge of his disposition than we possess, to judge whether or not he was in error or mistake; but we are the more inclined to adopt that view from his distinct disavowal that he was a party to the prosecution: and we put it to his candour, whether he was not more likely to be mistaken than so many other gentlemen; or whether, if he will not allow the honesty or competency of their testimony, he ought to complain that the public, with the knowledge that he was not on friendly terms with the accused, should look with suspicion on his own.—*Ed. L. E.*—*Oct. 29, 1842.*

SUPREME COURT.

FRIDAY, JAN. 6, 1843.

Before His Honor Sir John Lewes Pedder, Knight, Chief Justice; and the following Special Jury—Lieut. G. B. Skardon (foreman), Thomas Walker, H. Bennett, W. G. Walker, E. Archer, R. Pringle Stewart,

P. Oakden, James Cox, W. Archer, F. Palmer, James Flexman, and J. H. Campbell.

PUGH *v.* HAYGARTH.

This was an action for malicious prosecution, arising out of the late proceedings against Mr. Pugh at the police-office, the full particulars of which are detailed in the following report. The damages were laid at £1000. Counsel for plaintiff, Mr. Macdowell; solicitors, Messrs. Gleadow & Henty: for defendant, the Attorney-General; solicitor, Mr. Walford.

Mr. Macdowell addressed the jury on behalf of the plaintiff. It was an action on the case for malicious prosecution, in which William Russ Pugh was plaintiff, and Burton George Haygarth defendant. The declaration alleged, in the usual terms, that until the commission by defendant of the certain grievances therein named, the plaintiff was of good fame, name, credit, and reputation, and that he had never been guilty, or suspected to have been guilty, of the charges preferred against him by the defendant; and that he, well knowing these premises, falsely and maliciously accused Mr. Pugh of the crime of manslaughter. On the 22nd of August Dr. Haygarth laid an information against Dr. Pugh, before W. H. Breton, Esq., at the police-office, and without any reasonable or justifiable grounds accused him of having caused the death of the late Mr. Williams. It was necessary for him (the learned counsel) to state, that a previous part of the declaration alleged that Dr. Pugh performed a surgical operation upon the late Mr. Williams; and the substance of Dr. Haygarth's accusation was, that in so performing the said operation, his client had treated the deceased gentleman with gross negligence, ignorance, and rashness, thereby occasioning his death. In this manner defendant caused and procured a summons to be issued against Dr. Pugh, who, on the 26th August, attended in consequence to answer the charge at the police-office: the magistrates having heard the charge, adjudged and determined that Dr. Pugh was not guilty thereof, whereupon he was acquitted and discharged: defendant had not further prosecuted the said charge, and it was fully ended and determined. The declaration alleged in the usual form that plaintiff had been greatly injured in his

reputation and profession by this prosecution, and had also incurred sundry expenses, in compensation for which injuries and expenses he claimed at the hands of the jury the sum of one thousand pounds. The defendant had pleaded the general issue, which asserted, in substance, that he had not been guilty of the allegations contained in the declaration. It was now his duty to expound, in as clear and intelligible a manner as his capacity would permit, the circumstances that preceded the prosecution which formed the subject of this action, as he was instructed they would appear in evidence. On the evening before the performance of the operation alluded to in the declaration, Mr. Williams was taken suddenly ill at the theatre, was assisted home, and retired to bed suffering acutely. He was shortly afterwards attended by Dr. De Dassell, the medical adviser of the family, who, after some time, saw that Mr. Williams was in a state which rendered it advisable for further surgical aid to be procured. He sent first for Dr. Benson, and in course of the same day for Dr. Gaunt, and, at the suggestion of a friend of the family, Dr. Pugh was also called in. It met with the concurrence of his colleagues that an operation should be performed; but shortly before this decision was acted upon another medical gentleman, Dr. Salmon, from Perth, was called in—or, at all events, was present. He (Mr. Macdowell) believed the operation was one of an extremely difficult character, and likely to be attended with fatal consequences. He was incompetent to give any opinion from his own knowledge of the case; but from the writings of the most eminent men in the profession, it was clear that the operation was difficult, delicate, and dangerous. Much undoubtedly depended upon the skill of the operator; but even the skill of the most eminent surgeons often proved unsuccessful. He referred to the works of Mr. Travers and Sir Benjamin Brodie, who stated that when the disease was of so long standing as in Mr. Williams' case, an operation was rendered much more difficult and dangerous—that it ought to be performed immediately; but even then the result could not be anticipated with any degree of sanguine certainty. A protrusion had taken place in the right groin, and the operation which his client had to

perform was that of returning it to the abdomen. If the disease were of long standing, and the protrusion frequent, in all probability the gut would lose its elasticity and become paralysed. In this case, however skilfully the operation may have been performed, death might ensue, through the consequence of inactivity from repeated weakness ; this he believed was the fact in the present instance. He would prove that the operation was performed to the complete satisfaction of all the gentlemen present, and he believed Dr. Pugh acted as the operator at the express desire of Mr. Williams himself. Nothing was of greater consequence on such occasions than that the patient should have the most entire confidence in the skill and ability of the surgeon employed. The operation was performed in the presence of Drs. Benson, Salmon, Gaunt and De Dassell. It would be shown that immediately before, Mr. Williams was suffering most acutely, and hardly had the operation been completed when he felt relieved from his agonies of pain, and during the night slept or rested tranquilly. On the following day he spoke of the relief he had obtained, and alluded to the plaintiff in the kindest, most affectionate, and grateful terms. The operation was performed between three and four o'clock on the day subsequent to the night when the deceased gentleman was first attacked. He meant by speaking of the first attack, that particular attack which rendered the operation necessary ; but Mr. Williams had long suffered from the disease. Mr. Pugh being sensible that the operation would be attended with danger, suggested to Mr. Williams the propriety of making his will, which showed that he viewed the great responsibility imposed upon him with proper consideration. He would here remark that Sir Benjamin Brodie, in commenting upon the only case in which he operated, concludes by stating that the patient ultimately died. If, however, the operation was performed to the best of the surgeon's skill and ability, his duty was performed ; and the issue of life and death rested not with the physician, but with One who is greater, whose wisdom and whose will we are not to question. Immediate relief followed the operation in this case, and sanguine hopes were at one time entertained for the ultimate recovery of the de-

ceased gentleman. Two or three days afterwards, however, symptoms arose of a fatal nature, and all hope was banished. Mr. Williams died on the Sunday. A *post mortem* examination was had, in the presence of all the medical gentlemen who witnessed the operation, and also Dr. Doughty; a number of gentlemen, friends of deceased, were also in attendance, and amongst them that exceedingly intelligent and scientific investigator of nature, the Count Streleski. Several of those witnesses would be called before them, who saw no appearance of anything like a tumour on the part where the operation was performed: it was their unanimous opinion that the operation had been completed by the return of the gut to the abdomen, and death resulted from causes over which the most skilful physician could have no control. A slight discoloration was observed about the abdomen, but nothing more than was usual, and as appeared to him (the learned counsel) the symptoms exhibited were precisely such as the high authorities he had quoted laid down as rendering all recovery hopeless. The jury would recollect that all this took place in November, 1841. If amongst the gentlemen present at the *post mortem*, any one had seen that the operation had been imperfect, that the operator had displayed ignorance or negligence, it was a duty he owed to the profession, to himself, and the public, to have immediately pointed it out—not from any ill-natured or malignant feeling, but with a proper regard for the preservation of society and the character of the profession. It would have been his duty distinctly, plainly, and firmly, to have pointed out the mistake that had been made—to have shown how the operation had been clumsily and unsatisfactorily performed—and that, so far as human observation and judgment could determine, the patient's death was ascribable to malpractice. He wanted no medical authority to satisfy him that such was the duty, and such would have been the conduct, of any honorable member of the profession. The good sense of the gentlemen of the jury would tell them what was the object of a *post mortem* examination. If a suspicion were created that the deceased had met with his death from rashness, inability, or ignorance, and this suspicion

were strengthened by appearances not to be looked for after a successful operation, those appearances should have been immediately pointed out to his brethren in council. Should it happen that any one of the medical practitioners present at the *post mortem* observed such symptoms, how came it, he would ask, they were not pointed out at the time? How did it happen a communication was not immediately made to those who were assembled for the express purpose of ascertaining the cause of death? If any witness were produced before the jury, and stated that, whilst he saw evidence of what he believed to be gross negligence and ignorance plainly staring him in the face, and yet refrained from even alluding to it at the time when a proper investigation could have been made, he (the learned counsel) would answer that such testimony would reflect upon the person giving it the grossest personal and professional discredit. If such evidence were now offered, the jury would know how to appreciate it. Not one syllable was uttered at the examination to the discredit of the operator, but unanimous satisfaction was expressed that the operation had been well and skilfully performed. Death did not result, as he should prove, from any negligence or incompetency of the operator, but because the operation had not been performed years before. Notwithstanding every effort was made to prolong the existence of so estimable and valuable a member of society, he could not overcome the consequences of an obdurate and long standing disease; he was conveyed to the tomb bearing with him the respect and esteem of all who had the honor of his acquaintance. Six or seven months afterwards, in the month of June, the defendant arrived in the colony. The jury would naturally enquire, how it came to pass, as defendant was not in the colony at the time, as he was not attached to the deceased by any of those ties which bind the charms of friendship, or even by the most distant acquaintanceship, how it came to pass that he took so deep an interest in the death of Mr. Williams, a gentleman whom he had never laid his eyes upon, and who for the last twenty years had lived in a colony, which till then, the defendant had never visited. He arrived in June, and in the month of August following,

proceeded to the police office, and there laid an information charging plaintiff with manslaughter. Would the jury attribute this interference to the exuberance of a philanthropy which induced defendant to quit his own country in search of subjects whereon to expand his social and benevolent feelings, or would they attribute it to feelings of a far different description, such as alleged in the declaration? What commission had he for meddling with the matter? He could have known nothing of the circumstances; but a month or two after his arrival, and eight or nine months after performance of the operation proceeds to the police office, and there lays his accusation of manslaughter. The defendant alleged that his information was received from Dr. De Dassell, although he (Mr. Macdowell) was in duty bound to say, that gentleman denied having made any such statements as those attributed to him. However, supposing defendant to have received such information, he placed himself in this position; he either believed it or he did not. If he believed it, he could not do otherwise than look upon Dr. De Dassell as being privy to the crime which he imputed to the plaintiff; if he did not believe it, his conduct was most malicious. The jury must be satisfied that the defendant acted from malice, and the best proof was that there were no grounds whatever for his prosecution. A person might be actuated by malice in prosecuting a just charge, in bearing witness against a thief, but if he could show that defendant had no probable cause for his justification, it would go a long way to satisfy the jury upon the question of motives. If they were of opinion the operation was unskillfully performed, plaintiff was not entitled to recover, but if he proved the contrary and defendant failed in establishing any reasonable grounds, then they would ask what could have induced him to interfere, to what motive was his extraordinary proceeding to be imputed? Was he bound by his diploma, or invested with a roving commission for general prosecutions? Was he exercising the legitimate functions of a profession, which notwithstanding his belonging to it, was still honorable? Or was he calculating upon obtaining notoriety for an extension of his practice? Perhaps, he looked with jealous rivalry upon the exten-

sive professional practice of plaintiff, and certainly manifested a disposition to acquire business. He was annoyed that talents so splendid were neglected by an undiscerning public, and bethought himself that if he only succeeded in getting an investigation the mischief would be done. Amongst the unthinking portion of the public a prejudice is naturally created by a charge being preferred, whatever be the result, and it was astonishing how it tells, when a bold bad man goes forward with nothing to lose and everything to gain, with the determination if possible to reduce others to his own level, and actuated by no feeling but that of deep abominable malevolence. What was it to the defendant that he wounded the feelings of the family; that he harrowed up the sorrows of the widow and her children, so long as it "brought grist to his mill." The jury would recollect that the defendant could have known nothing except from hearsay; at the time of the operation he was 16,000 miles distant, and some months after his arrival preferred this charge against a gentleman who stood high in the profession: they would want nothing else to prove the motives by which the defendant was actuated. The only remaining question was what damages would they award. They were not to take into consideration the defendant's circumstances, for it was an old remark that "whoever had not a purse to pay had a person to suffer." The damages claimed were but small, and the utmost extent of what they could give he was sure would not sufficiently mark their detestation of so infamous a proceeding as the malicious prosecution which formed the subject of this action.

The Chief Justice made some observations respecting that part of the declaration which alleged that the plaintiff had been *acquitted* by Mr. Breton. The investigations at the police office were merely preliminary to a prosecution, and he had doubts whether it was correct to say that plaintiff was acquitted of that charge.

Mr. Macdowell subsequently cited a precedent which ran in a similar form.

The Attorney-General submitted that the case quoted had reference to a court which had the power of adjudicating upon the charge.

The Chief Justice said it was unnecessary to go into the argument then; the point could be argued in arrest of execution in the event of plaintiff obtaining a verdict.

Mr. Macdowell then called—

William Henry Breton, Esq.—I am a justice of the peace and police magistrate of Launceston, and was so in August last. I know the parties to this action; recollect the defendant appearing at the police office for the purpose of laying an information against Dr. Pugh. [Mr. Breton here produced the information.] The first part is in the hand-writing of Mr. Turner, the police clerk, and the middle in that of Dr. Haygarth. It was read over to him in my presence; I saw him sign it; this is his signature; I issued a summons for Dr. Pugh; this is the summons (produced); it bears my signature. The plaintiff in this action attended upon that summons, accompanied by a solicitor; the defendant attended also, and conducted his own case; he examined his witnesses, and cross-examined the others. The case occupied about twelve hours at one sitting, and was dismissed by me; I mean there was no case against Dr. Pugh, in my opinion, and I acquitted him as far as laid in my power. Dr. Haygarth's manner to the bench and witnesses was very improper; I think it imported malignant feelings against Dr. Pugh and the other medical gentlemen, excepting Drs. Doughty and De Dassell, his own witnesses.

By the Attorney-General.—You preside over a court of record. Do I understand you to say, you *acquitted* plaintiff of the charge preferred against him?

Mr. Breton.—In my opinion there was no case against him, and I dismissed it.

Attorney-General.—Do you conceive that defendant's behaviour was malignant or indignant?

Mr. Breton.—Both.

Attorney-General.—I should like to know how you formed an estimate of defendant's malignancy from his manner. What was there in his behaviour that exhibited malice; was he violent, passionate?

Mr. Breton.—I judged from his general manner, and his way of speaking to the witnesses and the bench. I had great difficulty in getting proper information from

him ; he wished it to be worded according to his dictation, and I according to the strict legal terms.

Attorney-General.—Are you aware of your own knowledge, whether the plaintiff and defendant were personally acquainted ?

Mr. Breton.—I really cannot say.

Attorney-General.—He had not been long in the colony, I believe ?

Mr. Breton.—He had not, to my knowledge.

Attorney-General.—You are a magistrate Mr. Breton, and supposing one of your brother magistrates acted unworthily, would you not feel indignant ?

Mr. Breton.—That would depend upon circumstances.

Attorney-General.—Supposing, I mean, that he acted in a manner calculated to disgrace the honor of the magistracy ?

Mr. Breton.—I might treat it with indifference.

Attorney-General.—Would you not look upon him with contempt ? And if you had known, or been credibly informed, that a person in the same high standing as yourself, had been officially guilty of gross misconduct, would you not feel indignant, and prefer a charge against him to have the matter investigated ?

Mr. Breton.—I doubt it very much ; I think I should prefer treating it in a quiet way.

Attorney-General.—The counsel for plaintiff stated that defendant accused the plaintiff with manslaughter ; I did not understand you to say that he made use of that term.

Mr. Breton.—He charged the plaintiff with gross ignorance, rashness, and carelessness ; thereby occasioning the death of Mr. Williams.

Attorney-General.—And you suggested the term manslaughter ?

Mr. Breton.—No ; I used the words in the end of the information.

Attorney-General.—You mean those following what defendant wrote himself ?

Mr. Breton.—Yes ; I had great difficulty in getting him to give a straightforward information, and at last Mr. Turner said to him, “write it yourself ;” he then wrote the words commencing after “inadequately per-

formed," down to "the case in question." He demurred at the last part, imputing gross ignorance, rashness, and negligence to plaintiff; but I told him, if plaintiff would not appear to a summons, I should have occasion to issue a warrant, which I would not do on slight grounds. It was necessary to have a clear and distinct charge in the information.

Attorney-General. — Oh! he was unwilling to use such strong language, so you gave him a helping hand.

His Honor. — Were the concluding words of the information read over to him?

Mr. Breton. — I fully explained, your Honor, that without introducing the last paragraph I could not grant a summons, because in the event of its not being obeyed, I should issue a warrant, which I would not do on slight grounds. The whole of the information was read over to him; he was asked if it was correct, and he said, "yes; it was."

Attorney-General. — Are these the words at which he demurred — "treated the said Thomas Williams with gross negligence, ignorance, and rashness, and thereby occasioned his death."

Mr. Breton. — He so far demurred, that he wished the information to end with the words, "case in question" — the last written by himself.

Re-examined by Mr. Macdowell. — What were your motives for refusing to issue a summons upon the first part of the information?

Mr. Breton. — I did not consider myself justified, because the charge was not expressed in strict legal terms.

Mr. Macdowell. — Do you recollect whether, when you suggested the addition, defendant left the office.

Mr. Breton. — Not on that occasion; before he laid the information he came to me to act as coroner, and I told him I could not interfere in the matter.

Mr. Macdowell. — But you are quite sure the words were read over to him before he signed the information?

Mr. Breton. — Yes; and the whole of the information.

The information was then given in evidence, and read by the clerk of the court:—

“The information and complaint of Burton George Haygarth, who deposeth and saith—I am a doctor of medicine; it has become known to me that a death occurred some time since in the town of Launceston under very questionable circumstances; there are circumstance of a very questionable character connected with the death of Thomas Williams, of Launceston, merchant; my information respecting these circumstances I derived from the medical attendant of the family, Dr. De Dassell, of Launceston, and from Mr. Surgeon Doughty, who was called in to inspect the body; I allege that due and suitable professional measures were not adopted, and were neglected to be used, in order to the surgical relief of the said Thomas Williams, by the party under whose professionable charge he was at the time of his decease, and had been previously thereto—this party was Mr. Pugh, of Launceston, surgeon; I have been informed that, for the relief of the said Thomas Williams, a surgical operation was deemed necessary; which operation was inadequately performed, *to the extent of a culpable failure, for the relief of the said Thomas Williams, and that culpable and ignorant neglect, in not renewing other, or similar, medico chirurgi- cal means, for the relief of the disease, characterised the mode in which the case was conducted, until the death of the said Thomas Williams took place; which death was due, so far as human probability can discern, to the culpable neglect of the professional measures which belong to the case in question.* The said Mr. Pugh, whose name I understand is William Russ, was, I allege, acting surgically in the operation which he performed upon Thomas Williams, and treated the said Thomas Williams with gross negligence, ignorance, and rashness, and thereby occasioned his death.

(Signed) “BURTON GEO. HAYGARTH, M.D., &c.

“Taken and sworn before me at Launceston,
this 22nd day of August, 1842.

(Signed) “WILLIAM H. BRETON, J. P.”

[The words marked in italics were in the handwriting of Dr. Haygarth; the sentence following them, is that against which he “demurred.” We have thus distinguished them to render the report more intelligible.]

The following summons, issued by Mr. Breton was also handed in and read :—

“ Island of Van Diemen’s Land,
(to wit.)

“ To Mr. John Byron, chief district constable of Launceston, and to all constables and others in the said island whom it may concern.

“Whereas information and complaint hath been made before me, one of her Majesty’s justices of the peace for the island of Van Diemen’s Land and its dependencies, upon oath of Burton George Haygarth of Launceston, doctor of medicine, that William Russ Pugh of Launceston, surgeon, acting surgically in performing lately at Launceston aforesaid, a certain operation upon Thomas Williams, late of Launceston aforesaid, treated the said Thomas Williams with gross negligence, ignorance and rashness, and thereby occasioned the death of the said Thomas Williams.

“ These are therefore to require you forthwith to summon the said William Russ Pugh before me at the police office, in Launceston, on Friday the twenty-sixth day of August, at the hour of twelve at noon of the same day to answer to the matter of the said complaint, and be you there then to certify what you shall have done in the premises. Herein fail not.

“ Given under my hand this twenty-second day of August, in the year of our Lord one thousand eight hundred and forty-two.

(Signed) “ WILLIAM H. BRETON.”

Dr. De Dassell was called, but did not appear. The crier of the court convulsed the judge, jurors, counsel, and audience, by several ludicrous and unsuccessful attempts to pronounce the doctor’s name, but after a great many of what Mr. Macdowell called “ elaborate efforts,” succeeded at last in hitting upon the right. The

witness, however, was not in attendance, though duly subpoenaed. The next witness called was—

Mathias Gaunt, Esq., surgeon.—I know the parties to this action, I also knew the late Mr. Thomas Williams; I recollect seeing him in November, 1841; he died on the following Sunday; I went to his house, having been requested to see him by some of his friends; I visited him as a professional gentleman; Dr. De Dassell and Mr. Benson were there. I saw Mr. Williams suffering severely from all the symptoms of strangulated inguinal hernia. I saw plaintiff there about two o'clock, he had not been in attendance before I went there; I had made an examination of the disease under which Mr. Williams was suffering, several times before on that day. No proposition had been made to operate upon Mr. Williams before that time; the operation was performed about five o'clock in the evening; it might have been later. Drs. Benson, De Dassell, Salmon, and myself were present; plaintiff was the operator. I mentioned to Mr. Williams that, in the event of not being able to reduce the hernia, it would be necessary to perform a surgical operation; there was a consultation held as to the propriety of performing that operation.

Mr. Macdowell was proceeding to question Dr. Gaunt relative to the results of the consultation, when—

The Attorney-General submitted, that any conversation those gentlemen had with each other, or any decision they arrived at, could not be received as evidence.

His Honor overruled the objection, and—

Witness continued. — They were unanimously of opinion, that an operation was absolutely necessary. The disease he was labouring under was that of strangulated inguinal hernia. When I first saw Mr. Williams he was suffering very severe pain all over the abdomen, more particularly around the umbilicus. There was a tumour situate in the right groin, which in his paroxysms of pain was more particularly visible; he was also suffering from vomiting and constipation. These were the leading symptoms. The swelling was about the size of a pullet's egg; several

attempts had been made to reduce the tumour, by returning the obtruding gut into the abdomen. These attempts were not successful. The tobacco injection, warm bath, and other usual remedial measures were resorted to. Plaintiff performed the operation because we deemed him most competent to do so; do not know that Mr. Williams had expressed any wish upon the subject: the result of our consultation was communicated to Mr. Williams; do not know by whom, think it was the plaintiff, but am not sure. The operator met with considerable obstruction in returning the protrusion to the abdomen; it was ultimately removed, and the protruding part recommitted to the abdomen. An almost immediate cessation from pain ensued, the sickness was relieved, and to a great extent, all those symptoms of anxiety and distress which had been manifested before. I should say the whole of the unfavorable symptoms were relieved with the exception of constipation. I have seen several similar operations performed; they are both difficult, delicate, and dangerous. Plaintiff operated, I should say very adroitly, and for a person who has had so few opportunities of performing such an operation with great self-command, and I may say dexterity. The sudden change to which I have alluded could not have taken place had the bowel continued strangulated after it had been returned. I saw Mr. Williams that evening and several times that day; he had a good deal of tranquil rest, and always expressed himself very much relieved. Between the operation, and the death of Mr. Williams, I once saw the part where it had been performed; I can speak distinctly to once, when the bandages became loose. There was no tumour, and the wound had a most favourable appearance. I left him on Wednesday evening without any unfavourable symptom, but that of constipation. On Wednesday evening I was sent for again. Mr. Williams was then becoming restless and anxious; there was some slight tenderness manifesting itself in the abdomen, those symptoms gradually increased until Saturday evening, when vomiting of fecal matter took place for the first time, these symptoms gradually increased until he terminated his life. I attribute his death to constipation in consequence of a portion of the gut becoming

paralyzed, as also by the passage through the gut having become impeded by the formation of membranous bands. The paralysis was occasioned by the length of time the gut had been constricted, and also the severity of the constriction; those symptoms in no way depended upon the operation. The operation, if successfully performed was the only means of relieving such symptoms. Such operations if successfully performed in many instances fail to produce that relief. The general disturbance of the system, however well the operation may have been performed, might have caused a fatal termination; the part that was down might not resume its functions, as in this case; but the only chance it could have, would be by placing it in its proper position. All that could have been done to attain that end, was done by the plaintiff in this instance. There was an examination after the death of Mr. Williams. All the gentlemen present at the performance of the operation were at the *post mortem* examination; Mr. Doughty and several other parties were present, Mr. Fletcher was there, and altogether about fourteen or fifteen persons. I took notice of the part where the operation had been performed; the wound was healed in the most kindly manner, there was not the slightest appearance of a tumour, nor any unusual discoloration. Upon the abdomen being opened the general appearance of the viscera was healthy; there was a small knuckle of intestine which was of a dark chocolate colour, evidently of the part which had been constricted, bound together by rather an acute angle, and also adhering to the sac, and the internal abdominal ring; but upon this portion of the intestines being cut away, an obstruction by membranous bands in the gut itself was discovered. I heard no observation made about a tumour. The *post mortem* examination was conducted by Dr. Pugh, Dr. Grant, and Dr. Doughty.

By his Honor.—Death must have ensued had not the operation been performed; I do not think he could have lived more than two days, and mortification might have taken place in a few hours.

By the Attorney-General.—Dr. De Dassell was sent for early on the Tuesday morning, about three or four o'clock; I do not know whether the tumour was

apparent in the groin at that time ; it was between nine and ten when I visited the patient ; the tumour was then apparent ; the operation was performed about five o'clock in the evening ; it was delayed a considerable time to give him an opportunity of settling his worldly affairs ; I have never operated myself for strangulated inguinal hernia, but have seen several operations performed ; I can speak to three times ; I recollect a case where twenty-four hours must have elapsed between the appearance of the tumour and the operation, this delay was unavoidable. When an operation becomes necessary, the sooner it is performed the less danger occurs ; delay is dangerous. In none of the three cases I have spoken of, was the gut paralysed after being returned, it is not a common occurrence, it would be perfectly impossible to ascertain whether the gut was paralysed, for it is to be presumed the gut will resume its functions when freed from the stricture.

The Attorney-General was questioning the witness relative to the contents of some medical work which he purported giving in evidence, when

His Honor said he thought he had better state at once that he could not receive any evidence of that sort. The witness could state anything he knew of his own experience.

Examination continued.—I never saw a case in which life was endangered by the performance of this operation. It becomes difficult and dangerous when the operator meets with unexpected obstructions. I have seen the operation performed by taxis ; the greater number are to be reduced in this manner.

The Chief Justice said the plaintiff was not charged with having performed the operation when it was inadvisable, but with having rashly and improperly performed it. As it appeared to him, the propriety or otherwise of resorting to the operation formed no part of the issue they had to try, and was not brought into question at the police-office.

The Attorney-General submitted that he was at liberty to prove any mal-treatment, whether before, during, or after the operation. The information was, that plaintiff had treated the deceased Mr. Williams with gross ignorance and rashness.

His Honor.—Yes : in so performing the said operation.

The Attorney-General thought the words could be construed as meaning either that plaintiff acted rashly and ignorantly in performing the operation at all, or during its performance.

His Honor thought, even if in common parlance the language would bear such a construction, it was not sufficiently definite for legal purposes. It was clear to him the only question at the police-office was, as to the manner in which the operation was performed, without any reference to the general treatment of the patient.

Examination continued.—It is necessary to return the protrusion into the abdomen for a successful operation ; the swelling then goes down : there is sometimes a little thickness of the integuments, but in this case there was none in the *post mortem* examination. It is not likely the gut would return after death ; it certainly could not return to the place where I saw the tumour. The paralysed gut of which I have spoken was not in a state of mortification : there may be cases when it is necessary to cut off a portion of the gut before returning it to the abdomen : the gut was highly discolored, and in a congested state ; but no medical man would have been justified in cutting away that portion of it : there cannot be a second opinion upon this point. It is not usual for people to die from an operation for hernia.

William Benson, Esq.—I am a surgeon ; I have been in court during the evidence given by Dr. Gaunt ; I was called in to visit Mr. Williams on the morning of the 2nd November, 1841 ; I was present at an operation performed on him by plaintiff that day ; plaintiff was called in about one o'clock ; the operation was performed between four and five ; it is only resorted to when other remedies have failed ; a consultation had taken place before the operation was performed ; it was very carefully and very skilfully performed ; Mr. Williams died on Sunday ; I attended the *post mortem* on Monday ; before the operation, there was a tumour on the right groin about the size of a pullet's egg ; I did not observe anything of the kind at the *post mortem* ; do not think there could have been anything of the kind without my seeing it ; there was no tumour visible ; the wound

had been dressed, I believe, on several occasions; I recollect one distinctly.

Cross-examined.—I am a licentiate of the College of Surgeons; I have seen six or eight cases of strangulated hernia operated upon, I have heard of the discovery of Dr. O'Beirne of Ireland; if it succeeds, an operation is not necessary; that operation is by introducing a tube into the fundament, by which the wind is discharged from the intestine, and returns to its place; I have seen it recommended, but never seen it tried.

James Grant, Esq., surgeon.—I attended a *post mortem* examination, in November, 1841, on the body of Mr. Williams. I examined closely the part which had been operated upon, I saw no tumour, there could not have been any there, without my observing it; in my opinion Mr. William's death was caused in consequence of the strangulated part having received so much injury as not to resume its functions, the injury was occasioned by strangulation, it was the character of the disease, and did not depend upon the performance of the operation. There was no observation made respecting a tumour or protrusion by any person present; I should say the operation had been successfully performed; I first knew of defendant's being in Launceston in June, I never heard of him until I saw some letters in the papers.

John Richard Salmon, Esq.—I am a surgeon, was present at an operation upon Mr. Williams, in November 1841, have been in court during the examination of the preceding witnesses. I consider the operation was performed as well as any surgeon could have performed it under similar circumstances; I was not present at the *post mortem*.

Theodore Bryant Bartley, Esq.—The late Mr. Williams was a connection of mine, plaintiff was called in at my request, I went for him myself, he reached the house between two and three o'clock; I know that a communication was made to Mr. Williams respecting an operation, because I conversed with him on the subject. We conversed principally about the extreme danger he was in, and the necessity of arranging his worldly affairs. I saw Mr. Williams immediately before, and soon after the operation, he said there was a

cessation of the pain and appeared tranquil. I was not present at the *post mortem* examination, I saw the part where the operation had been performed, there was no tumour there, I think this was on Thursday morning. Mr. Williams showed me a tumour shortly before the operation, as the seat of his disease, it was almost the size of a small egg.

Samuel Watson.—I attended Mr. Williams on the day of his death, I laid out the body and washed it, I did not observe the least swelling in the right groin.

Cross-examined.—Don't recollect having any conversation with Dr. De Dassell at that time, had conversation with him during the day.

An objection was taken against the admission of anything Dr. De Dassell might have said as evidence.

Mr. James Henry.—I am managing clerk to Messrs. Gleadow and Henty, I know of Mr. Gleadow's attending professionally at the police office on an information exhibited against him by defendant, his charge was £10.

The Chief Justice, well, that was a pretty fair charge, I think.

Witness.—It was paid to me by plaintiff.

William Fletcher, Esq.—I was intimately acquainted with Mr. Williams, I was present at the *post mortem* examination; I observed that part of the groin where the operation was performed; did not see any tumour; I saw the part after the operation whilst Mr. Williams was alive, there was no tumour at all.

This closed the case on behalf of the plaintiff.

The Attorney-General then addressed the jury for the defendant. It became his duty to offer a few words in defence of his client. The learned counsel for the plaintiff had already read the declaration, which alleged that defendant without having any just grounds, wilfully, maliciously, and as the learned counsel insinuated, for sinister and vile purposes, preferred the charge of manslaughter against plaintiff. If less had been alleged the plaintiff would not have been entitled to recover; but with the boldness which distinguishes his character, the learned gentleman braved every difficulty to obtain damages from their hands. If he (the Attorney-General) proved to their satisfaction, that defendant had

reasonable grounds for suspicion, though no actual proof could be adduced, even though the contrary might have been proved, they would agree that he not only was doing no wrong, but was performing a bounden and indispensable duty, incumbent upon him both as a medical practitioner and a private member of the community. Defendant came to the colony a perfect stranger, unbiassed by local or personal prejudices, and what grounds were there for imputing malicious motives? It was essential for the plaintiff to have proved the existence of this malice; but nothing had been advanced from which it could even be inferred. They had omitted to prove this indispensable ingredient; they had given no evidence in support of the *animus* alleged in the declaration. What had transpired during that trial to justify the jury in coming to the belief that defendant had been actuated by malice against a gentleman to whom he was unknown, with whom he had never quarrelled; whom, for aught that appeared before them, he had never seen. He cared not whether the information upon which the defendant acted was right or wrong. If persons competent to judge of such a case had made communications to him, and declared that an individual had lost his life through the negligence or rashness of a member of the profession, if he believed these statements, he was not only justified, but bound to prosecute the charge; and the more ardour which distinguished him, the more honour was due. The facts were these: His client had been invited to a medical *soirée* at the house of Dr. Doughty; during the course of the evening the conversation turned upon medical subjects, and it was then stated that Mr. Williams had come to his death by the maltreatment of the plaintiff. These statements were made by Dr. De Dassell, the medical attendant of the family, and others confirmatory thereof were given by Dr. Doughty, who attended the *post mortem*. His client, in the natural language of one jealous of the honor of the profession, mindful of the well-being of society, the safety of individuals, and security of the public, immediately expressed his surprise that no investigation had taken place. Careless whom he might offend, and in the height of his indignation even for a while forgetting the common rules of courtesy, he up-

braided those present with a want of manliness, in not having at once gone forward to substantiate so serious a charge. The first act of his client, upon hearing these circumstances, was to communicate them to the coroner, who rightly determined not to interfere, as it was altogether out of his province. He went to a justice of peace for advice, and ultimately laid an information at the police-office. The Attorney-General read the information, and contended that throughout there was no evidence of malice. He stated facts, not from his own knowledge, but as communicated to him, and gave the names of his authors. The course he adopted was a legitimate one for forcing from Drs. De Dassell and Doughty the truth or falsehood of their statements. The proceeding might even be regarded as that of a friend to plaintiff, who, having heard the accusations preferred against him, took that public step to extinguish them for ever. Such might have been the proceeding of one of plaintiff's friends, and by no means implied malicious motives. If there was no proof of malice, there was end of the case. If they were of opinion that the statements of two medical gentlemen were sufficient grounds for creating in defendant's mind a sincere belief of the truth of these accusations, he was entitled to their verdict; even if the operation had been ever so skilfully performed. He (the Attorney-General) had been restricted to an enquiry into the actual performance of the operation; and if it be said the defendant had no ground for suspicion, how did it happen that Mr. Breton entertained the information: he also must have believed the testimony of Drs. De Dassell and Doughty. But he would now express his entire concurrence in the decision at which he arrived, and from the evidence he (the Attorney-General) had heard that day, his own mind, and no doubt the minds of the jury, were perfectly satisfied upon that point. It was not necessary for the vindication of his client that he should impute or prove mismanagement against plaintiff. If defendant had been imposed upon by corrupt motives, and for corrupt purposes, he was still scathless from this action, and deserved the protection of the verdict, should the jury be of opinion that he was only performing a conscientious duty in causing the matter

to be investigated. He was bound by an oath, taken upon his admission into the profession, to expose any case of malpractice that might be brought under his knowledge. The whole of his information amounted to this—"I have been informed of these things—they are of great importance—I solicit an enquiry into them." The magistrate then very properly desired to have a distinct charge, and added the concluding sentence against which the defendant demurred. When he found the success of his laudable endeavours was likely to be perilled, he ventured one iota further, and signed the information as it now stood. But even the addition ought not to be regarded as a declaration made upon his own knowledge, but merely as an opinion formed upon what had been communicated to him. Under these circumstances, would the jury come to the conclusion that defendant was actuated by malicious motives? They could never confirm the insinuations of the learned counsel, that he was influenced by envy of a more successful rival. Defendant was a gentleman of education and ability, and possessed a character which had never been impeached. He (the Attorney-General) had cross-examined some of the witnesses with the view of ascertaining what weight was due to the statements of Dr. De Dassell. It was not necessary for him to cast obloquy upon plaintiff; his object was to negative the imputation of malice, and the jury whilst they could not do otherwise than acquit plaintiff of any impropriety whatever, would at the same time do justice to his client by absolving him from the imputation of motives by which he was never influenced.

John Doughty, Esq., surgeon.—I know plaintiff and defendant, and also knew the deceased Mr. Williams. I recollect having some medical friends at my house in June, 1842. Drs. Salter, Haygarth, Fitzpatrick, De Dassell, and myself were present. The conversation turned upon medical subjects. Before that evening I had been at the *post mortem* examination of Mr. Williams.

The Chief Justice said, he felt bound at that stage of the proceedings to state that any communication made to the defendant could not go to the jury in justification. It was necessary for the parties who had made those communications to substantiate their accuracy.

He could not tell the jury that a mere verbal statement constituted either in law or reason a probable cause for such proceedings.

Considerable discussion took place upon this point, the Attorney-General arguing that the defendant having received his information from credible authority, was justified in acting thereon. Suppose he saw a man lying bleeding in the street, and a person standing near pointed to a man running away, as having committed the offence, should he not be justified in giving him in charge ?

The Chief Justice replied, that the Attorney-General in that case would be acting from his own observation, and not mere hearsay.

After a lengthy discussion his Honor ruled that anything said by Dr. De Dassel at the *soirée* could not be received as evidence from Dr. Doughty, but he could of course speak of anything that he knew of his own knowledge.

The Attorney-General respectfully differed in opinion from his Honor, and requested him to make a note of his desire to offer evidence of the conversation which passed in the hearing of the defendant, which having been done the case proceeded.

Dr. Doughty's examination continued.—I stated to Dr. Haygarth I was present at the *post mortem*, and that immediately the sheet was removed, I saw an elevation or tumour on the part where the operation had been performed. It occurred to me immediately that the operation had been improperly performed—I thought at the time the intestine had not been returned to the abdomen. I told Dr. Haygarth I was of opinion the hernia had not been properly reduced. In some cases the hernia cannot be returned. I made that statement in the presence of the gentlemen I have mentioned. I did not then state what was the probable cause of Mr. Williams' death. I stated that from what I knew myself, and what I had heard, the operation had not been properly performed. Dr. Haygarth said it was a lamentable circumstance, and one that ought to be investigated. I imputed to Dr. Pugh personally, maltreatment in that case, and should have spoke in the room, had I been called in as a medical gentleman : I believe

I was sent for by Mr. Pugh. I asked him how the gut was in the inguinal canal at the *post mortem* examination, and how it happened Mr. Williams died under all the symptoms of strangulated hernia: he said it was owing to a septum having formed. He alluded to a case that occurred at the hospital, in a kind of retaliation. I gave plaintiff to understand, that in my opinion, Mr. Williams had not been properly operated upon, and he retaliated by mentioning a case at the hospital. I told him I had nothing to do with that case. This was a day or two after the *post mortem*.

Cross-examined.—The medical gentlemen assembled about the latter end of July. The conversation turned upon the “medical row,” defendant first brought up the subject of Mr. Williams’ death. Messrs. Benson, Salmon, Gaunt, De Dassel, myself, and many others were present at the *post mortem*. I observed the tumour immediately the sheet was removed, I was close to the body, the other gentlemen stood behind me, I was nearest the body.

Mr. Macdowell.—Do you know for what purpose you were called to witness the examination?

Witness.—I do not know who sent for me, but I understood it was Mr. Pugh.

Mr. Macdowell.—Were you called for use or ornament?

Witness.—I leave that to be supposed.

Mr. Macdowell.—I presume you know the object of a *post mortem* examination?

Witness.—It is generally to ascertain the cause of death.

Mr. Macdowell.—Then your extreme delicacy prevented you from mentioning what you have described?

Witness.—I did not know whether I was called in as a medical gentleman, or as a friend of plaintiff’s.

Mr. Macdowell.—And you did not think it right to make public the symptoms you observed out of pure friendship to the plaintiff.

Witness.—Yes; but I should have pointed them out had I considered myself attending professionally; I mentioned them afterwards to the plaintiff, when he was by himself.

Mr. Macdowell.—Has your recollection always been

equally accurate—have you never stated that Dr. Benson was present when you mentioned them to plaintiff?

Witness.—No; I never did.

Mr. Macdowell.—I believe at the time of the *post mortem* you knew nothing of the particulars of Mr. Williams' case?

Witness.—I did not, excepting from hearsay, I never attended him during his illness.

Mr. Macdowell.—You were then on good terms with the plaintiff, and your friendship has since ceased?

Witness.—Yes; after I mentioned to the plaintiff what I had observed at the *post mortem*.

By a Juror.—The opinion I expressed to the defendant was founded upon what I knew of my own knowledge, and what Dr. De Dassel said at the time; I was quite astonished at his statements. That opinion would not be entirely justified by what I myself observed.

W. G. Sams, Esq.—I recollect having some conversation with defendant respecting the death of Mr. Williams. He came to me to make a deposition respecting his death, and I recommended him to go to the Police Magistrate. He said he felt himself bound by an oath he had taken, to investigate that matter; his manner was not at all malicious.

This closed the case for the defendant, when Mr. Macdowell rose to reply. His learned friend had put forward several topics, the novelty of which recommended them to their attention. Amongst the most singular was the assertion that had he a friend against whose character floating rumours were abroad, he should imitate the example of his client, who from motives of pure friendship and regard to plaintiff prosecuted him at the police office upon a charge of manslaughter. There was an ancient proverb which applied well to this case:—"Save me from my friends, I will take care of my enemies." Because, forsooth, he hears and disbelieves these reports, it was his duty to go forward, as a public prosecutor, to complete that happiness the fruition of which was intended for plaintiff. It would thus appear that the defendant had made his head the receptacle for a vast portion of absurdity. The counsel had fairly and honorably admitted that after hearing the testimony of one or two witnesses he

was no longer prepared to maintain that any blame was attributable to plaintiff, and could they believe that the defendant was an innocent victim of misrepresentation, when the facts which appeared before them were equally within his reach? They had heard that shortly after his arrival, the defendant was invited to a *soirée*, when the conversation turned upon what Mr. Doughty elegantly and classically designated "the medical row." The doctor "more in sorrow than in anger," expressed his extreme horror at the distressing occurrence. The report it appeared originated with Dr. De Dassell, who might perhaps, have some reputation in that way—but he did not come before them to testify its truth. Respecting the oath taken by the defendant, he had never heard anything to compare with it in the course of his life, excepting that of the celebrated knight of La Mancha, in imitation of whom this *Doughty knight* set forth, determined that nothing should resist him, and resolved to have at the first windmill that came in his way. He should like to know when and by whom such an oath was administered. The crier of the court after several elaborate efforts succeeded in calling Dr. De Dassell, who appeared to act as Squire Quixotte, but he was not to be found. And he would ask through curiosity what had become of the ever memorable *soirée*? What had become of Mr. Fitzpatrick. Where was Dr. Salter? Dr. De Dassell evidently was *non est inventus*, and Dr. Doughty had acknowledged that he was not now on terms with plaintiff. It was not evidence, but, it was natural that some anxiety should be manifested as to what had become of such a very nice party. The learned gentleman reviewed the defence in a strain of humourous sarcasm, which kept the court in constant laughter, but the length to which this report has already extended, renders it impossible for us to report his speech in full. He animadverted in the strongest terms upon the conduct of Dr. Doughty, and confirmed the observations made in his opening address. He considered his testimony utterly unworthy of belief. He strongly repudiated the doctrine laid down by the Attorney-General, that mere hearsay could be received as a justification, excuse, or

extenuation; it was not to be endured, that a person's character, and prospects were thus to be perilled.

His Honor in summing up, said, the attention the jury had paid, freed him from the necessity of reading over the evidence. The whole case was contained in a nutshell. Did the defendant act from malicious motives and without reasonable grounds? It was plaintiff's place to prove motives, but these could be inferred from the act itself; the law implied malice when the act was malicious. It was not sufficient justification to say, I was told such and such a thing, it was necessary to produce those persons to prove the facts if true. His Honor was of opinion, that defendant had failed in making out the slightest justification in law or morals.

The jury were absent about a quarter of an hour, and brought in a verdict for plaintiff, damages £250.

The case occupied the court till past five in the afternoon, and created considerable excitement.

The defendant in this action, after twelve months' imprisonment in Her Majesty's Gaol in Hobart Town, was liberated under the Insolvent law, having sworn that he had not one shilling to offer in liquidation of the damages and costs.

ON THE PROPRIETY OF DIVIDING ADHESIONS IN THE OPERATION FOR HERNIA.

(A QUERY.)

TO THE EDITOR OF "THE LANCET."

SIR,—At the desire of very many unprofessional persons, forming a large portion of the inhabitants of this town, I am requested to solicit the favor of the *authority* of your decision on the following question:—

At a *post mortem* examination, after the fatal issue of an operation for hernia, where death supervened, with

permanent constipation, on the fifth day after the operation, the following state of parts was discovered :

“About two inches of discolored intestine was lying in contact with the internal ring, and adhering to it. Considerable bands confined the bowel to the sac : these bands confined the bowel so as to form a kind of knuckle at rather an acute angle.

“The small, discolored portion of intestine was doubled back on itself, and had been permanently kept in that position by transverse bands of long standing.

“The knuckle of the gut formed an angle, and the serous surfaces thus placed in apposition were firmly adherent.”

Query—What is the consequence of returning the intestine in such a state of preternatural adhesion ?

By affording the “authority” of your decision upon the foregoing question, you will greatly oblige many of your far distant but constant readers.

Your obedient servant,

B. RAYGARTH, M.D., &c.

(Formerly student at Guy's.)

Launceston, Van Diemen's Land,
May 6, 1844.

* * Not having before us the detailed history of the case alluded to by our correspondent, and not knowing for what purpose our opinion is demanded on a point which, in reality, admits of but little, if any discussion, we must remind our professional readers in Van Diemen's Land, that we merely take upon us to answer the above surgical query *as it is put to us* ; not to give an opinion respecting the merits or demerits of the treatment pursued in the particular case referred to.

It is a rule in operating for hernia, to break down or to destroy any adhesions which may exist between the intestine and the sac, or between the folds of the intestine themselves. Indeed, it is partly with a view to ascertain whether any such adhesions exist beyond the stricture, that many surgeons recommend a small portion of intestine to be gently drawn out after the division of the stricture, previous to returning the contents of the

sac into the cavity of the abdomen. The probable consequence of returning folds of intestine which are united to each other at an acute angle by false membranes, is the persistence of the symptoms of strangulation. No practical surgeon could intentionally commit such an error. The existence of adhesions may, however, escape the notice of the operator, or they may be situated so high as not to be discernible. When this occurs, the termination of the case is generally fatal. If the intestine *really was returned* in the state described by Dr. Raygarth, and the adhesions were not the result of subsequent inflammation, an error was certainly committed. M. Maisonneuve has recently presented to the Academy of Sciences, Paris, the details of a case in which, having operated on an old lady for inguinal hernia, without giving relief,* owing to the presence, as he afterwards found, of internal adhesions, he re-opened the wound, and, not being able to destroy the adhesions, established an artificial anus.—*Ed. Lancet, February 1.*

CORRESPONDENTS.—In a late number of the LANCET we published a surgical query, made to us by a Dr. Raygarth (or Haygarth), of Launceston, Van Diemen's Land, answering the same. We have since received a communication from a gentleman who was assistant to the practitioner in whose practice the case alluded to by Dr. Haygarth occurred, and are informed that the question was addressed to us with the view of substantiating a libel, for which the said Dr. Haygarth had previously been condemned in the colonial court. Such being the case, we only have to congratulate ourselves for the caution with which we answered the query alluded to.—*Lancet, February 22.*

* M. Maisonneuve re-opened the wound in consequence of having operated *without giving relief*. In this case the operation was followed by *immediate relief*, all the symptoms of strangulation having ceased. There was, it is true, no evacuation from the bowels; but M. Pelletan ["CLINIQUE CHIRURGICALE"] and others have recorded successful cases in which six or seven days elapsed before this took place; and the attention of the profession has recently been directed to this important point by the writers on hernia, who deprecate the practice of stimulating the injured bowel by the too early exhibition of purgatives after operations.

TO THE EDITOR OF THE "LAUNCESTON EXAMINER."

MEDICAL.

SIR,—Your correspondent in Wednesday's number, who perceived by my advertisement of a pamphlet my intention of publishing further particulars relative to the subject of his communication, (which has thus again become a public question,) has almost rendered it unnecessary for me to proceed further with that intention, by kindly furnishing to you and to the public the selection from the LANCET. Were I to offer fifty other opinions for publication, I could not select one more decisive than that with which the LANCET has favored me.

One observation only remains now to be made, and that is indispensable to all in search of truth. The LANCET observes—"If the intestine was really returned in the state described by Dr. Haygarth, and the adhesions were not the result of subsequent inflammation, an error was certainly committed." Now it is necessary to be here observed that the *statement* of the case, which is distinguished in my letter by inverted commas, *is not mine*; but the *facts* there cited, are stated, and certified and sworn to, by three gentlemen, severally and unanimously; namely, by Dr. Gaunt; by Mr. Grant, surgeon; and by Mr. Benson, Colonial Assistant Surgeon. The words are quoted verbatim from the sworn evidence of the first of the three gentlemen, and from the certificates of the two latter gentlemen, under their sign manual from the columns of the EXAMINER of the thirty-first of August, (1842). These gentlemen being the friends of the operator, and one of them his partner in business, would doubtless state nothing but what truth compelled them to state.

As, therefore the testimony of these gentlemen unanimously responds in the affirmative to the "if" of the LANCET (all of them testifying that such was the state of parts, and Mr. Grant expressly specifying that the "transverse bands were of *long standing*," and, therefore "not the result of subsequent inflammation,") the inference of the LANCET must stand good, undenied and undeniable, irrevocably beyond even the possibility of argument or evasion. And a century hence medical men may judge of the *facts* presented them by these

three gentlemen, as accurately as they can at this day, or could three years ago.—I have the honour to remain, sir, your most obedient servant,

BURTON GEORGE HAYGARTH, M.D., &c.

Launceston, August 7.

In the Press, shortly to be issued—price one shilling.

REMARKS ON HERNIA, with notes and illustrations ; together with some account of a case which terminated fatally in the town of Launceston, V.D.L. : showing the nature, symptoms, causes, varieties, and treatment of this affection, with explanatory *designs* and *diagrams*, and freed from the use of technical terms and forms of expression.

By A PHYSICIAN, late of Glasgow.

CONCLUSION.

When called to attend Mr. T. Williams, I found him suffering intense pain in the region of the umbilicus ; the tumour in the right groin exceedingly tender, so much so, as to prevent an attempt at reduction by the taxis ; and the general condition of the patient, such as induced me to express my fears for the result, if an operation were longer delayed.

Having been requested to operate, I made an incision through the skin, superficial fascia, &c., and exposed the tumour ; upon opening the sac, a small quantity of coffee-coloured serum escaped, a director was then introduced, and the sac opened, to within a short distance of the internal abdominal ring. A knuckle of intestine, about the size and colour of a ripe Orleans plum, was thus exposed to view ; apparently constricted, at

the internal ring; the knife was passed into this opening, and a few fibres divided, the finger could then be brought into contact with the margin of the ring, but the intestine was still irreducible, and it became evident to myself, and the gentlemen by whom I was assisted, that the cause of strangulation was more deeply seated.

Upon depressing the tumour, and at the same time exerting slight traction, a thick white band was brought into view, stretching tightly across the neck of the hernia, and forming a sulcus of considerable depth.

The division of this band was an operation of considerable difficulty; its position precluding the use of a director, there was great risk of wounding the intestine. The division having been effected, upon pressing the tumour between the points of the thumb and fingers, a slight gurgling sensation was felt, and the protruded bowel passed with ease into the cavity of the abdomen.

Upon introducing my finger, I could detect no adhesions, and the freedom with which it moved in every direction, led me to hope that none existed; it was not until the *post mortem* examination that any one connected with the treatment of the case was aware that adhesions of any kind did exist.

In the course of the operation, the only difficulty encountered, was occasioned by the band referred to; and I was at a loss to account for the presence of such a structure, so situated, its shining surface and extreme density giving it much the appearance of tendon.

The hernial sac, formed by the dilated pouch of the *tunica vaginalis*, after having been slit open in the early stage of the operation, ceased to be an object of consideration,—its serous surface was smooth, healthy, and free from every appearance of recent, or of chronic,

inflammation, and there was not the slightest adhesion to the protruded viscus.

After having reduced the hernia, the edges of the sac, and its coverings, were brought into apposition by two points of suture; a piece of lint was applied to the wound, secured by a bandage, and the patient left to repose—having expressed himself relieved from the extreme suffering he had for some hours endured—"the wound," he said, "was painful, but his condition had become one of comparative ease."

Upon retiring to another apartment, each of the gentlemen who had assisted at the operation, assured me of his conviction, that operative measures could not have placed the patient in more favourable circumstances than those in which we had left him.

The operation was succeeded by freedom from pain, and discontinuance of vomiting. The patient partook of nourishment, and enjoyed some hours of calm repose. On the day following the operation I dressed the wound, which was healthy, and when doing so examined the inguinal region. All presented a satisfactory appearance; the bowels had, however, not been relieved.

On the second day I dressed the wound, applied some strips of isinglass plaister, and removed the sutures; a considerable part of the incision had united by the first intention, and everything looked to my satisfaction. The bowels still resisted all attempts to excite peristaltic movement. The case proceeded in the manner detailed in the previous evidence, until the fifth day from the operation, when the fatal termination occurred.

A *post mortem* examination was made, by my request,

in the presence of several medical gentlemen, and others, friends of the deceased, in all amounting to about fourteen persons.

On opening the abdomen, the general serous surface presented no indication of recent inflammatory action ; and the intestines, throughout their whole length, contained no ingesta, and were lying in a perfectly flaccid state.

The bowel (*a portion of ilium*) at the seat of disease was folded upon itself, at an acute angle ; and, the serous surfaces being glued together by effusion of lymph, the conical figure thus formed, resembled the wet thumb of a leather glove, the point of which was lying at the internal opening of the pouch of the *tunica vaginalis*, which alone formed the sac laid open at the operation.

On opening the diseased part, filamentous portions of lymph were observed stretching across the bowel. The mesentery attached to the concave margin of this portion of intestine was firmly adherent to the common peritoneal lining, to which it had the appearance of having been for many years connected ; it was thickened and contracted, forming projecting folds of considerable size. One of these transverse folds proved to have been the band presented at the operation ;—firmly bound to the peritoneum at its two extremities, its centre had been forced forward during a violent fit of laughter, and by forming a loop over the distended intestine, had occasioned strangulation.

The adhesions of the mesentery were referred to by me as explanatory of some circumstances mentioned by the patient. “He had been the subject of frequent attacks of colic, and was under the necessity of constantly exciting the bowels by the use of purgatives.

The hernia had descended almost daily, and, on the day previous to the operation, had been returned three times, the reduction having been readily effected with the point of the finger applied external to the dress. He *had never worn a truss*, and was not aware of any change in the size of the swelling since his earliest recollection."

I was induced to solicit permission to remove the diseased parts, as they presented points of great pathological interest, and I was anxious to procure a drawing of them. For this purpose I dissected off the peritoneum, covering the facia iliaca, and with it the adherent mesentery and its portion of ilium. Could I have foreseen that ten months afterwards I should be publicly charged with manslaughter, a preparation affording evidence of so much value would have been highly prized. It was, however, unfortunately neglected.

W. R. PUGH, M.D.

The history of this case taken in connection with the *post mortem* appearances, will perhaps justify its arrangement with the class of Hernia cases briefly alluded to by B. Phillips, Esq., F.R.S., in his clinical remarks on hernia.

"In many of these cases the injury done to the intestine, is so great, that even though it be liberated early, some chronic inflammation is set up in it, and the patient dies."—*Vide Medical Gazette, April 1st, 1842.*

The mortality attendant upon operations for the relief of strangulated hernia is clearly shewn in the following:—

"*Statistics of Strangulated Hernia treated at Wurtzbourg from 1816 to 1842.* By M. TEXTOR. (*Revue*

Medico-Chirurgicale de Paris, January 1843.)—The number of cases of strangulated hernia treated from 1816 to 1842 was 172. Of these, 98 were inguinal; 71 crural; and 3 umbilical. Of these two died before they were treated by taxis or operation. Of those treated by the taxis, 105 were cured, and 9 died. Of those subjected to an operation, 32 were cured, and 24 died. Of the 71 crural hernia, 65 occurred in women, and only 6 in men. Of the 98 inguinal hernia, only 13 occurred in women, but 85 in men. It is stated that the average mortality of operations for strangulated hernia at Paris is 4 out of every 7 cases. At Wurtzbourg, it was only 3 out of every 7.”—*Edinburgh Medical and Surgical Journal*, 1843, p. 501.

Table showing the Mortality attending the Operation for Hernia.—*LANCET*, Oct. 5, 1844.

Where or by whom recorded, &c.	No. of Cases.	No. of Deaths.	Proportion.
In Sir A. Cooper's work on Hernia..	77	36	1 in 2
By Travers	14	8	1 in $1\frac{1}{2}$
Dewar, of Dunfermline	17	4	1 in 4
Scarpa (on Hernia)	16	5	1 in 3
Lawrence (on Hernia)	22	7	1 in 3
Clement	8	3	1 in $2\frac{2}{3}$
Hey (he performed the operation forty times, but no detailed account is given of all the cases)	12	6	1 in 2
Wurtzburgh, from 1816 to 1842	56	24	1 in $2\frac{1}{2}$
Recorded in different periodicals as isolated cases, &c.	88	30	1 in 3
Malgaigne, Hospitals of France:—			
Patients between fifty and eighty years of age	97	70	1 in $1\frac{1}{4}$
Other ages	86	44	1 in 2
Guy's Hospital, from Sept. 1841 to Dec. 1842	19	10	1 in 2
Scotch Hospitals during 1843	11	3	1 in $3\frac{2}{3}$
Cases witnessed by the author	6	3	1 in 2
Liverpool Infirmary, for two years ..	4	1	1 in 4
Liverpool Northern Hospital—nine years	12	6	1 in 2
Total	545	260	1 in 2







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